NO. OF COPIES RECEIVED	7		30-02	5-29822		
DISTRIBUTION						Dr. Onh
SANTA FE					Form C-101 Revised 1-1-6	5
FILE	-1			I	5A. indicate	Type of Lease
U.S.G.S.	1				STATE	
LAND OFFICE	-1				.5. State Oll	& Gas Lease No.
OPERATOR	1					
					<i>IIIIII</i>	
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK						
1a. Type of Work						ement Name
		DEEPEN	PLU	G BACK	Eunice N	Ionument South Uni
b. Type of Well					8. Form or L	ease Name
WELL X WELL 2. Name of Operator	OTHER		SINGLE X	ZONE		
•	Inc				9. Well No. 435	
Chevron U.S.A. Inc. 3. Address of Operator						
P.O. Box 670 Hobbs, NM 88240					10. Field and Pool, or Wildcat	
4. Location of Well C 660 North						Nonument G/SA
UNIT LETTER	LOC	ATED	FEET FROM THE	LINE		
AND 2130 FEET FROM THE	West Lin	OF SEC22	TWP. 215 RGE.	36E NMPM		
			<u> </u>		12. County	
************	*********		<i>{}}}}}}</i>		Lea	<i>HHHHHA</i>
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<i>41111111111</i>	19. Proposed Depth	19A. Formation	<u>, , , , , , , , , , , , , , , , , , , </u>	20. Rotary or C.T.
			4300	Grayburg	l	Rotary
21. Elevations (Show whether DF, RT,			21B. Drilling Contractor			. Date Work will start
3602.8' GL	Blanke	t	Unknown		A.S.A.	Р
23.	Pi	ROPOSED CASING AN	D CEMENT PROGRAM			
	ZE OF CASING	WEIGHT PER FOO	T SETTING DEPT	'H SACKS OF		EST. TOP
14 3/4	11 3/4	42	350	410		Circ.
11	8 5/8	24 å 32	2800	600		Circ
7 7/8	5 1/2	15.5	4300	700		Circ
Mud program: 3 28	0-350 FW/ 850-2800 BW 800-4300 FW/	Spud 10 ppg 28 v Starch 8.4 pp	is 10 ph og 30 vis 10 pl	1		
See attached BO	P drawing fo	r 3000 psi wor	rking pressure.			
The Amoco State by Amoco and pro mailed to Amoco	oduces from	ed in the same the Eumont. A	quarter-quart copy of this	er sectio applicati	n, is op on has b	erated een
IN ABOVE SPACE DESCRIBE PROPO	SED PROCRAM. IF	ROPOSAL 15 TO DEEPEN	OR PLUG BACK. GIVE DATA	ON PRESENT PR		AND PROPOSED HEW PROFILE
TIVE ZONE, GIVE BLOWOUT PREVENTER PR	OGRAM, IF ANY.					
Flamal and an area for the						· ····································
I hereby certify that the information abo Signed <u>M. E. Akin</u>	ove is true and comp	lete to the best of my l	knowledge and bellef.		Date_12/9	

\_ TITLE

(This space for State Use) Orig. Signed by Paul Kautz APPROVED BY <u>Geologist</u>

DEC 1 5 1986

CONDITIONS OF APPROVAL, IF ANY:

Parmi Expires 6 Months From Approval

