State of New Mexico Energy, Minerals & Natural Resources Department

District I
PO Box 1988, Hobbs, NM 88241-1988
District II
PO Drawer DD, Artesia, NM 88211-8719
District III
1608 Rio Branos Rd., Axtec, NM 87416
District IV

PO Box 2088, Senta Fe, NM 87504-2086

01-24-95

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, NM 87504-2088

Form C-101
Revised February 10, 1994
Instructions on back

Submit to Appropriate District Office

State Lease - 6 Copies
Fee Lease - 5 Copies

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- 1	AMENDED	DEPODT
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APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE ² OGRID Number ¹Operator name and Address ARCO Permian 000990 P.O.BOX 1610 3 API Number MIDLAND, TX 79702 30-0 25-32834 ⁴ Property Code 5 Property Name ⁶ Well Number 1445 **ERNEST C.ADKINS** 13 Surface Location UL or lot no. Section Township Range Lot. Idn Feet from the North/South Line Feet from the East/West line County B q **21S** 36E 1051 NORTH 1980 EAST LEA Proposed Bottom Hole Location If Different From Surface UL or lot no. Section Lot. Idn North/South Line Township Range Feet from the Feet from the East/West line County Proposed Pool 1 Proposed Pool 2 <u>EUMONT YATES/SR/QUEEN</u> 11 Work Type Code Well Type Code 13 Cable/Rotary 14 Lease Type Code 15 Ground Level Elevation <u> 3585</u> 16 Multiple 19 Contractor 17 Proposed Depth 18 Formations 20 Spud Date 3700 YATES/SR/QUEEN NO NA <u>02-15-95</u> ²¹ Proposed Casing and Cement Program Hole Size **Casing Size** Casing weight/foot Setting Depth Sacks of Cement **Estimated TOC** 12 1/4 8 5/8 24 400 300 **SURF** 7 7/8 5 1/2 15.5 3700 800 **SURF** ²² Describe the proposed program. If this application is to DEEPEN or PLUG BACK give the data on the present productive zone and proposed new productive zone. Describe the blowout prevention program, if any. Use additional sheets if necessary NSP-1685 Permit Expires 6 Montes From Approval Date Unless Drilling Underway. ²³ I hereby certify that the information given above is true and complete to the best **OIL CONSERVATION DIVISION** of my knowledge and belief. Approved by: GRIGHER! SERVICE SY JERRY SEXTON Signature: DEFFICE I SUPERVISOR Title: Approval Date: JAN 27 Title: **Expiration Date:** AGENT Conditions of Approval:

Attached

915 688-5672