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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

5A. Indicate Type of Lease	
STATE ☐	FEE ☒
5. State Oil & Gas Lease No.	

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work	
b. Type of Well DRILL ☐ DEEPEN ☐ PLUG BACK ☒ OIL WELL ☒ GAS WELL ☐ OTHER ☐ SINGLE ZONE ☐ MULTIPLE ZONE ☐	
2. Name of Operator Amoco Production Company	
3. Address of Operator P. O. Box 68, Hobbs, NM 88240	
4. Location of Well UNIT LETTER <u>N</u> LOCATED <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE OF SEC. <u>5</u> TWP. <u>22-S</u> RGE. <u>37-E</u> NMPM	
5. Proposed Depth	
6. Formation	
7. History of C.T.	
8. Divisions (Show whether DF, RI, etc.)	
9. Kind & Depth of Plug Bond	
10. Drilling Contractor	
11. Approx. Date Work will start	

7. Unit Agreement Number
8. Name of Lease Name Grizzell Deep
9. Well No. 1
10. Field and Pool, or Well Unit Und. Blinebry
11. County Lea
12. Proposed Depth -
13. Formation Blinebry
14. History of C.T. -
15. Divisions (Show whether DF, RI, etc.) 3437' DF
16. Kind & Depth of Plug Bond -
17. Drilling Contractor -
18. Approx. Date Work will start 12-3-79

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
Existing Casing Will Not Be Altered					

Propose to recomplete to the Blinebry by the following procedure:

Pull both tubing string and packer. Run a cast iron bridge plug set at 6480'. Run a cement retainer set at 3640'. Squeeze perfs 3666'-3718' with 50 sx Class H cement. Perforate 5566', 5575', 5590', 5610', 5623', 5637', 5648', 5654', 5670', 5687', 5703', 5715', 5727', 5736', 5743', 5753', 5762', 5770', 5793', 5806', 5816', 5835', 5852', 5860', 5867', 5873', 5893', 5900', 5913', 5927', 5942', 5953', 5959', 5978', 5998', 6009', 6028' with 1 JSPF. Run tubing, packer and tailpipe. Packer set at 5400'. Tailpipe at 5430'. Acidize with 2000 gal 15% LSTNE HCL acid. Frac with 40,000 gal frac fluid with 61,500# 20/40 sand and 6000# 10/20 sand and 300# rock salt in 400 gal 30# gelled brine. Flush with 50 bbl 30# gelled fresh water. Swab back load and evaluate production.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM; IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE FLOWOUT PREVENTIVE PROGRAM, IF ANY.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

Signed Bob Lewis Title Assistant Administrative Analyst Date 11-21-79

(This space for State Use)

APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT I DATE NOV 20 1979

CONDITIONS OF APPROVAL, IF ANY:

0+4 NMOCD-H, 1-Hou, 1-Susp, 1-BD