

Submit to Appropriate
District Office
State Lease - 6 copies
Fee Lease - 5 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

API NO. (assigned by OCD on New Wells)
30-025-10161

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL ☐ RE-ENTER ☐ DEEPEN ☐ PLUG BACK ☒

b. Type of Well:

OIL WELL ☐ GAS WELL ☒ OTHER ☐ SINGLE ZONE ☐ MULTIPLE ZONE ☐

2. Name of Operator

Chevron U.S.A. Inc.

3. Address of Operator

P.O. Box 670, Hobbs, NM 88240

7. Lease Name or Unit Agreement Name

Rollon Brunson

8. Well No.

4

9. Pool name or Wildcat

Blinebry

4. Well Location

Unit Letter G : 2086 Feet From The North Line and 1874 Feet From The East Line

Section 10 Township 22S Range 37E NMPM Lea County

10. Proposed Depth
6200'

11. Formation
Blinebry

12. Rotary or C.T.

13. Elevations (Show whether DF, RT, GR, etc.)

3416' GL

14. Kind & Status Plug Bond

15. Drilling Contractor

16. Approx. Date Work will start
Upon approval

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17 1/4"	13 3/8"	48#	300'	300 SX	Circ.
12 1/4"	9 5/8"	36#	2850'	1300 SX	700'
8 3/4"	7"	23#	6450'	700 SX	2260'

IT IS PROPOSED TO ABANDON DRINKARD, ADD ADDITIONAL PERFS IN BLINEBRY (5378-5568), CONVERTING FROM DUAL TO SINGLE, RETURN TO PRODUCTION.

*CIBP SET @ 6200'

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 BLOWOUT PREVENTER PROGRAM, IF ANY.

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

SIGNATURE T. M. Bealessio TITLE Drlg. Engr.

DATE 5-7-90

TYPE OR PRINT NAME T. M. Bealessio

TELEPHONE NO. 393-4121

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

MAY 8 1990

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: