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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

5A. Indicate Type of Lease
STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
5. State Oil & Gas Lease No.
LG-28 6

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		8. Term or Lease Name State "GA"	
2. Name of Operator Amoco Production Company		9. Well No. 1	
3. Address of Operator P.O. Drawer A, Levelland, Texas 79336		10. Field and Pool, or Wildcat Wildcat - Morrow	
4. Location of Well UNIT LETTER <u>K</u> LOCATED <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE OF SEC. <u>13</u> TWP. <u>23-S</u> RGE. <u>34-E</u> NMPM		12. County Lea	
21. Elevations (Show whether DT, RT, etc.) 3359 GL		19. Proposed Depth 14,000	19A. Formation Morrow
21A. Kind & Status Plug. Bond Blanket-On File		21B. Drilling Contractor NA	20. Rotary or C.T. Rotary
22. Approx. Date Work will start May 15, 1978			

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
20"	16"	65#	750'	Circulate	Surface
13 3/4"	10 3/4"	40.5#	5100'	Circulate	Surface
9 1/2"	7 5/8"	26.4#, 33.7#	12,100'	Tieback to 10 3/4"	
6 1/2"	5	15#	11,600 to 14,000'	Tieback to 7 5/8".	

Propose to drill and equip well in Morrow zone. After reaching TD logs will be run and evaluated, perforate and stimulate as necessary in attempting commercial completion.

Mud Program: 0-750' - Native mud and fresh water.
750'-5100' - Native mud and brine water.
5100'-14,000' - Commercial mud and cut brine water to maintain good hole conditions.

BOP program attached.
Gas is not committed.

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.

Signed Ray W. Cox Title Administrative Supervisor Date May 1, 1978

(This space for State Use)

APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT DATE MAY 4 1978

CONDITIONS OF APPROVAL, IF ANY:

0+4-NMOCE-H; 1-Div; 1-Susp; 1-RC

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