

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☐DEEPEN ☐PLUG BACK ☒

b. TYPE OF WELL

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 (Report location clearly and in accordance with any State requirements.)*

At surface 1980' FSL & 660' FWL, Sec. 26

At proposed prod. zone (Unit L, NW/4 SW/4)

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

28 miles northwest of Jal, NM

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drig. unit line, if any)

16. NO. OF ACRES IN LEASE

17. NO. OF ACRES ASSIGNED
TO THIS WELL

18. DISTANCE FROM PROPOSED LOCATION*

TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

19. PROPOSED DEPTH

20. ROTARY OR CABLE TOOLS

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

3660.1 GL

22. APPROX. DATE WORK WILL START*

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
	Existing casing not	altered.		

Propose to recomplete well to the Wolfcamp formation using the following procedure.

Unset the packer. Spot a ^{35 SX} (25 SX) Class H cement plug from 14,300'-14,000'. Pull tubing and packer. Run 2-3/8" tubing and perforate 13,494'-498', 13,533'-537', 13,553'-561', 13,569'-577', 13,618'-622' with 4 JSPF. Run packer and on-off tool and profile nipple.

Test tubing above and below packer to 8000#. Set packer at approx. 11,800'

Gas is not dedicated.

BOP Program attached.

*if this recompletion is successful it
will be necessary to file a new C-102*

RECEIVED

AUG 21 1979

U. S. GEOLOGICAL SURVEY
HOBBS, NEW MEXICO

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. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

SIGNED Ray W. Cox TITLE Administrative Supervisor DATE 8-21-79

(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

0+5-USGS-H

1-Hou

1-Susp

1-BD

1-Southland Royalty-Midland

*See Instructions On Reverse Side

APPROVED
AS AMENDED

AUG 22 1979

JAMES F. SIMS
DISTRICT ENGINEER