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U.S.G.S.	
LAND OFFICE	
OPERATOR	

5A. Indicate Type of Lease
STATE FCC

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
Texaco Producing Inc.

3. Address of Operator
P. O. Box 728, Hobbs, New Mexico 88240

4. Location of Well
 UNIT LETTER E LOCATED 2117 FEET FROM THE North LINE
 AND 617 FEET FROM THE West LINE OF SEC. 6 TWP. 23-S RGE. 37-E NMPM

7. Unit Agreement Name

8. Farm or Lease Name
King "D"

9. Well No.
1

10. Field and Pool, or Wildcat
Langlie Mattix

12. County
Lea

19. Proposed Depth
3800'

19A. Formation Queen

20. Rotary or C.T.
Langlie Mattix Pulling Unit

21. Elevations (show whether DF, KI, etc.)
3409' DF

21A. Kind & Status Plug. Bond
Blanket

21B. Drilling Contractor

22. Approx. Date Work will start
March 20, 1986

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12-1/4"	9-5/8"	36#	1350'	600	Cmt. Circ.
8-3/4"	7"	20#	2870'	460	Cmt. Circ.

It is proposed to deepen the subject well 315' to a new TD of 3800' and complete in the Langlie Mattix. Following is the proposed procedure:

- 1.) Rig-up pulling unit. (Install BOP.) Kill well and pull 5" slotted liner that extends from 2839' to 3248'.
- 2.) Rig-up reverse unit, TIH w/workstring and 6-1/4" bit. Clean out open hole to 3485' (TD) and deepen to 3800'.
- 3.) TOH w/workstring and bit.
- 4.) Run CNL-GR Log from TD to 1800'. Run Caliper Survey across open hole interval.
- 5.) TIH w/workstring and bit, circulate, condition hole to run liner, TOH w/workstring and bit.

(Continued on attached sheet)

ON 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 W.B. Cade Title Dist. Operations Manager Date February 21, 1985

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT 1 SUPERVISOR TITLE _____ DATE FEB 28 1986

CONDITIONS OF APPROVAL, IF ANY: