

UNITED STATES OF AMERICA
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

Arch Petroleum Inc.

3. ADDRESS OF OPERATOR

777 Taylor St., Suite II-A, Ft. Worth, Texas 76102

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*

At surface

2131 FNL & 660 FEL Section 34, T23s, R37E

At proposed prod. zone

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

9 miles north of Jal, New Mexico

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drlg. unit line, if any)2131
660

16. NO. OF ACRES IN LEASE

40

17. NO. OF ACRES ASSIGNED
TO THIS WELL

40

18. DISTANCE FROM PROPOSED LOCATION*
TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

1141

19. PROPOSED DEPTH

7150

20. ROTARY OR CABLE TOOLS

N/A

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

3275 KB

22. APPROX. DATE WORK WILL START*

6-12-89

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
17 1/2"	13 3/8"	48#	331	300
12 1/4"	9 5/8"	32.3 & 36#	2919	1400
8 3/4"	7"	23 & 26#	9100	650

Proposal: Plug back Devonian Zone; Perf'd at 7184-7256 (38 holes) using CIBP at 7150' with 2 sx cement on top. Well is currently shut-in (makes 100% water).

Recomplete well in Abo zone. Perforate interval 6625-7040'. Acidize and test porosity intervals separately. Place on production.

BOP to be installed for recompletion.

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 David R. Glass TITLE Operations Manager DATE 5-25-89

(This space for Federal or State office use)

PERMIT NO.

(ORIG. SGD.) DAVID R. GLASS

APPROVAL DATE

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: