

COPY TO O. C. C. SUBMIT IN TRIPPLICATE\*  
(Other instructions on reverse)  
UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYForm approved.  
Budget Bureau No. 42-R1425.

## 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

HNG Oil Company

## 3. ADDRESS OF OPERATOR

P.O. Box 2267, Midland, Texas 79702

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

At surface

1980' FNL and 660' FEL Sec. 8

At proposed prod. zone

Same

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

7.5 miles West from Jal

## 10. DISTANCE FROM PROPOSED\*

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

660'

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

1320'

## 16. NO. OF ACRES IN LEASE

640

## 19. PROPOSED DEPTH

3600'

17. NO. OF ACRES ASSIGNED  
TO THIS WELL

40

## 20. ROTARY OR CABLE TOOLS

Rotary

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

2972' GR

## 22. APPROX. DATE WORK WILL START\*

2-15-79

## 23.

## PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12-1/4"	9-5/8"	36#	800'	600 sacks
8-3/4"	7"	20#	3600'	1000 sacks

Pressure Control Program:

A double blow-out preventor and rotating head w/a choke manifold will be installed at the 9-5/8" casing setting point. The drill string will be equipped with a safety valve. All equipment will be tested to 3000 lbs. after installation.

RECEIVED

JAN 25 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.

SIGNATURE

*Betty A. Gildon*

Betty A. Gildon

Regulatory Clerk

DATE 1-9-79

(This space for Federal or State office use)

PERMIT NO.

APPROVAL DATE

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions On Reverse Side

APPROVED  
DATE*James V. Lewis*  
JAMES V. LEWIS  
DISTRICT ENGINEER