						25-27101	
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DISTRIBUTION	TRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION						
SANTA FE						5	
FILE						Type of Lease	
U.S.G.S.					STATE	FEE X	
LAND OFFICE					.5. State Oil	& Gas Lease No.	
OPERATOR							
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK							
ia. Type of Work					7. Unit Agre	ement Name	
DRILL		DEEPEN 🗌	PLUG	BACK 🗌	8. Farm or L		
b. Type of Well	D. Type of Well						
WELL Y WELL	WELL X WELL OTHER ZONE X ZONE						
2. Name of Operator ARCO Oil & Gas Company						9. Well No.	
Division of Atlantic Richfield Company						2	
3. Address of Operator						10. Field and Pool, or Wildcat	
P. O. Box 1710, Hobbs, New Mexico 88240						Langlie Mattix 7 R Qn	
4. Location of Well Unit Letter F LOCATED 1980 FEET FROM THE North Line							
1							
AND 1980 FEET FROM	THE West LI	ie of sec. 25 tw	P. 23S RGE. 3	6E NMPM			
					12. County		
					Lea		
		111111111111111111111111111111111111111	-	19A. Formation	1	20. Rotary or C.T.	
			3750 '	7 R Qn		Rotary	
21. Elevations (Show whether DF)	, RT, etc.) 21A. Kind	& Status Plug. Bond 21	B. Drilling Contractor		22. Approx.	Date Work will start	
3341.8 GR	GC	A #8	Not Selected		11-1	.5 - 80	
23.	F	ROPOSED CASING AND	CEMENT PROGRAM				
	,	_	CEMENT TROOKAM				
SIZE OF HOLE					CEMENT	EST. TOP	
12½"	8-5/8" OD	 	24# K-55 1200'			Circ to surf	
7-7/8"	5½" OD	15.5# K-55	3750 '	775		Circ to surf	
Propose to dril Mattix 7R Qn fo					ies of t	he Langlie	
Blowout Prevent	er Program Atta	ched.			7.1.16	DVAL VALID DAVS UNIESS COMMENCED,	
					[4] 15 SEP 3년	Co. Caralle Caral	
				EX	PIKES	12012	
IN ABOVE SPACE DESCRIBE PR	ROPOSED PROGRAM: IF	PROPOSAL IS TO DEEPEN OR	PLUG BACK, GIVE DATA C	ON PRESENT PRO	DUCTIVE ZONE	AND PROPOSED NEW PRODUC	
I hereby certify that the information	on above is true and comp	olete to the best of my kno	wledge and belief.				
Signed from (1) Supra Title Dist. Drlg. Supra.					Date 10/14/80		
(This space for	State Use)						
/ (1.115,5)200 (6.11	A Section	e L			/i	Charles and Charles	
APPROVED BY	<u> </u>	TITLE	**************************************		ATE		

CONDITIONS OF APPROVAL, IF ANY: