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DISTRIBUTION	- JFW	MEW MEXICO OIL CONSERVATION COMMISSIC.			Form C-101	7	
SANTA FE	""	mexico dia davida			Revised 1-1-6	.5	
FILE				ſ	5A. Indicate	Type of Lease	
U.S.G.S.					STATE	FEE X	
LAND OFFICE		. <b> </b>				& Gas Lease No.	
OPERATOR				ł			
					111111	HIIIIII	
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK					X/////////////////////////////////////		
1a. Type of Work		<u> </u>	<del></del>		7. Unit Agre	ement Name	
			DI UO D	1 cm [ ]			
b. Type of Well	DEEPEN PLUG BACK				8. Farm or Lease Name		
OIL GAS	SINGLE X MULTIPLE ZONE ZONE				Whitten		
					9. Well No.		
ARCO ULI				l	1		
JIVISION 3. Address of Operator	OI_ALIANTI	c Richfield CO.			~	d Pool, or Wildcat	
					Jalmat Yates 7 R Qn.		
P.O. Box 1710, Hobbs, New Mexico 88240  4. Location of Well North Line							
4. Location of Well UNIT LETTER F LOCATED 1650 FEET FROM THE NOrth LINE							
2210	Wost	e of sec. 33 <u>tw</u>	P. 23S RGE. 3	6E NMPM			
AND 2310 FEET FROM THE	West	E OF SEC. 33 TW	mimmi	17777	12. County	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	
					Lea		
AHHHHHHH		<del>HHHHHH</del>	<del>HHHHH</del>	4444	111111	HHHHPrri	
	4444444	<del>/////////////////////////////////////</del>	Proposed Depth 19	A. Formation	777777	20, Rotary or C.T.	
		//////////////////////////////////////	1			•	
			3740'	Yates		Rotary  Date Work will start	
21. Elevations (Show whether DF, RT,	1	-	B. Drilling Contractor		22. Approx	. Date Work will start	
3415.5 GL	GCA	#8	Hillin Drillin	g Co.	1		
23.	P	ROPOSED CASING AND	CEMENT PROGRAM				
		T		T		T ==== ===	
	ZE OF CASING	WEIGHT PER FOOT			F CEMENT EST. TOP		
11"	8-5/8" OD	24# K-55	1300'	600		Circ. to surf.	
7"	5-1/2" OD	15.5# K-55	3740 <b>'</b>	1125		Circ. to surf.	
į							
Propose to drill a Oil Zone.	development	well and test t	the producing c	apabilit	ics of	the Jalmat	
					APPROV.	AL VALID	
ı					I DO DAYS UNLESS		
					5. Y 9 C	OMMENCED,	
n1 . n .	D	-11			. /	12/61	
Blowout Preventer	Program atta	ened.		EXEISI	se 4/	8/8/	
Gas Dedicated.				EXI III.			
IN ABOVE SPACE DESCRIBE PROPERTY ZONE. GIVE BLOWGUT PREVENTER P	OSED PROGRAM: IF	PROPOSAL IS TO DEEPEN OR	PLUG BACK, GIVE DATA ON	PRESENT PRO	DUCTIVE ZONE	E AND PROPOSED NEW PROD	
I hereby certify that the information a	bove is true and com	plete to the best of my kn	owledge and belief.				
1 5 5	264	TuleDist. Dr	lg. Supt.		Date	1-281	
Signed Signed							
(This space for Stat				ov 27	.14	4N 8 1981	
1.	10 10 10 10 10 10 10 10 10 10 10 10 10 1	alle see trainer a la			<b>.</b>		
APPROVED BY					0.4.7.5		
CONDITIONS OF APPROVAL, IF AN		TITLE	308 1 1 1 M		DATE		