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| 5A. Indicate Type of Lease |
| STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |

5. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

| | | |
|--|--|---|
| 1a. Type of Work DRILL <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> | | 7. Unit Agreement Name |
| b. Type of Well OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Disposal Well | | 8. Farm or Lease Name Lea |
| 2. Name of Operator Chaparral Service, Inc. | | 9. Well No. 2 |
| 3. Address of Operator P. O. Box 1768, Eunice, New Mexico 88231 | | 10. Field and Pool, or Wildcat San Anders |
| 4. Location of Well UNIT LETTER <u>A</u> LOCATED <u>850</u> FEET FROM THE <u>North</u> LINE AND <u>950</u> FEET FROM THE <u>East</u> LINE OF SEC. <u>17</u> TWP. <u>23S</u> RGE. <u>37E</u> NMPM | | 12. County Lea |
| 19. Proposed Depth 5000' | | 19A. Formation San Anders |
| 20. Rotary or C.T. Rev. Unit | | 21. Approx. Date Work will start Nov. 15, 1985 |
| 21A. Kind & Status Plug. Bond State Wide | | 21B. Drilling Contractor ABC Rental |
| 21. Elevations (Show whether D.F., K.T., etc.) 3327 Ground Level | | |

23.

PROPOSED CASING AND CEMENT PROGRAM

| SIZE OF HOLE | SIZE OF CASING | WEIGHT PER FOOT | SETTING DEPTH | SACKS OF CEMENT | EST. TOP |
|--------------|----------------|-----------------|---------------|-----------------|------------|
| 12 1/4 | 8 5/8 | 28 | 1,150' | 700 | Circulated |
| 7 7/8 | 5 1/2 | 17 | 6,700' | 2,000 | Circulated |

Rig up pulling unit and reverse unit, dig out wellhead, weld on bell nipple, install wellhead, install B.O.P., run drilling collars and start drilling out bridge plugs; test casing to O.C.D. rules to 500# for 30 minutes. Perforate disposal area 4000' to 5125', run 4,100' 2 7/8 tubing, set packer, treat with acid, start injecting water.
Squeezed off plugs @ 2709 to 3247
Will notify O.C.D. when well is started.

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. 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 Eddie W. Seay Title President Date October 24, 1985

(This space for State Use)

Eddie W. Seay

APPROVED BY Oil & Gas Inspector TITLE Oil & Gas Inspector DATE DEC 10 1985

CONDITIONS OF APPROVAL, IF ANY:

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DEC 9 - 1985
O.C.D.
HOBBS OFFICE