

Submit to Appropriate
District Office
State Lease - 6 copies
Fed. Lease - 5 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

API NO. (assigned by OCD on New Wells)

30-025-30821

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL ☒

RE-ENTER ☐

DEEPEN ☐

PLUG BACK ☐

b. Type of Well:

OIL
WELL ☐

GAS
WELL ☒

OTHER ☐

SINGLE
ZONE ☐

MULTIPLE
ZONE ☐

7. Lease Name or Unit Agreement Name

EUGENE COATS

2. Name of Operator

TEXACO PRODUCING INC.

8. Well No.

8

3. Address of Operator

P.O. Box 3109 MIDLAND, TEXAS 79702

9. Pool name or Wildcat

JALMAT T-y-SR

4. Well Location

Unit Letter J : 1980 Feet From The EAST Line and 1880 Feet From The SOUTH Line

Section 3

Township 24-South

Range 36-EAST

NMPM

LEA

County

10. Proposed Depth

3245'

11. Formation (TAN SILL, YATES)

UPPER JALMAT

12. Rotary or C.T.

ROTARY

13. Elevations (Show whether DF, RT, GR, etc.)

GR-3387

14. Kind & Status Plug. Bond

BLANKET

15. Drilling Contractor

BASIN

16. Approx. Date Work will start

3-22-90

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17 1/2"	13 3/8"	48 #	40'	REDIMIX	SURFACE
12 1/4"	8 5/8"	24 #	1300'	800 SX 'H'	SURFACE
7 7/8"	5 1/2"	15.5 #	3245'	750 SX 'H'	SURFACE

CEMENTING PROGRAM

CONDUCTOR - REDIMIX

SURFACE CASING - 600 SX CLASS 'H' WITH 27% GEL + 27% CaCl₂ (14.8 ppg, 1.38 cu ft/sx, 6.5 gal wtr/sx) FOLLOWED
By 200 SX CLASS 'H' WITH 27% CaCl₂ (15.6 ppg, 1.19 cu ft/sx, 5.2 gal wtr/sx)

PRODUCTION CASING - 500 SX 35/65 Poz CLASS 'H' WITH 67% GEL, 57% SALT (12.8 ppg, 1.87 cu ft/sx, 9.9 gal wtr/sx)
FOLLOWED By 250 SX CLASS 'H' (15.6 ppg, 1.18 cu ft/sx, 5.2 gal wtr/sx)

NO OTHER OPERATOR IN THIS 1/4 1/4 SECTION.

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.

SIGNATURE

C. Wade Howard

TITLE

ENGINEER'S ASSISTANT

DATE

2-22-90

TYPE OR PRINT NAME

C. WADE HOWARD

945-

TELEPHONE NO. 688-4606

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY

DISTRICT I SUPERVISOR

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

MAR 15 1990

Permit Expires 6 Months From Approval
Date Unless Drilling Underway.

RECEIVED

MAR 7 1990

MOBBS OFFICE