

Submit to Appropriate
District Office
State Lease -- 6 copies
Fee Lease -- 5 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

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

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

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)

30-025-31731

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

B-1431-3

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 ☐

2. Name of Operator

TEXACO EXPLORATION AND PRODUCTION INC.

8. Well No.

14

3. Address of Operator

P. O. Box 3109, Midland, Texas 79702

9. Pool name or Wildcat

RHODES YATES SEVEN RIVERS

4. Well Location

Unit Letter F : 2445 Feet From The NORTH Line and 1521 Feet From The WEST Line

Section 27 Township 26-SOUTH Range 37-EAST NMPM LEA County

10. Proposed Depth

3400'

11. Formation

YATES/SEVEN RIVER

12. Rotary or C.T.

ROTARY

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

GR-2976'

14. Kind & Status Plug. Bond

BLANKET

15. Drilling Contractor

TO BE SELECTED

16. Approx. Date Work will start

OCTOBER 1, 1992

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
16	13 3/8	48#	40'	REDI-MIX	SURFACE
12 1/4	8 5/8	24#	1150'	950	SURFACE
7 7/8	5 1/2	15.5#	3400'	650	SURFACE

CEMENTING PROGRAM: CONDUCTOR - REDIMIX.

SURFACE CASING - 725 SX CLASS C w/ 2% GEL & 2% Cacl2 (14.1ppg, 1.51cf/s, 7.6gw/s). F/B 225 SX CLASS C w/ 2% Cacl2 (14.8ppg, 1.32cf/s, 6.3gw/s).

PRODUCTION CASING - 400 SACKS 35/65 POZ CLASS H w/ 6% GEL, 5% SALT, 1/4# FLOCELE (12.8ppg, 1.87cf/s, 9.9gw/s). F/B 250 SACKS CLASS H w/ 2% Cacl2 (15.6ppg, 1.19cf/s, 5.2gw/s).

THERE ARE NO OTHER OPERATORS IN THIS QUARTER QUARTER SECTION.

UNORTHODOX LOCATION - EXCEPTION HAS BEEN REQUESTED (COPY ATTACHED).

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. P. Basham / cwh TITLE DRILLING OPERATIONS MANAGER DATE 09-10-92

TYPE OR PRINT NAME C. P. BASHAM TELEPHONE NO. (915) 688-4621

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

SEP 29 '92

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

711-3166

Permit Expires 6 Months From Approval
Date Unless Drilling Underway.