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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

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			7. Unit Agreement Name		
b. Type of Well OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>			8. Farm or Lease Name William H. Harrison "A" WN		
2. Name of Operator Atlantic Richfield Company			9. Well No. 2		
3. Address of Operator P. O. Box 1710, Hobbs, New Mexico 88240			10. Field and Pool, or Wildcat Langlie Mattix		
4. Location of Well UNIT LETTER <u>D</u> LOCATED <u>660</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>West</u> LINE OF SEC. <u>29</u> TWP. <u>24S</u> RGE. <u>37E</u> NMPM			12. County Lea		
19. Proposed Depth 3345'			19A. Formation Jalmat Gas		20. XXXXXXX D.D. Unit
21. Elevations (Show whether DF, RT, etc.) 3290' GR	21A. Kind & Status Plug. Bond GCA #8	21B. OWNER Contractor W.O./ not selected	22. Approx. Date Work will start 12/1/75		

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
No change in casing.					

Propose to recompleate this well to the Jalmat Gas zone in the following manner:

1. Load hole w/6% KCL water & spot 700 gals acetic acid across zone to be perf'd.
2. Perforate Jalmat w/1 JS ea @ 2931, 36, 41, 51, 65, 70, 3000, 35, 58, 70, 93, 3100, 17, 26, 33, 36, 83, 3203, 35, 92, 3313, 18, 29, 33'.
3. Run trtg pkr, set above perfs & frac perfs 2931-3333' w/20,000 gal cross linked 6% KCL water cont'g 30,000# 20/40 sd in 3 equal stages separated by 2 stages of 6 - 7/8" ball sealers in each stage.
4. Swab back load & sand to cleanup, POH w/trtg pkr. Run completion assy & put on production.

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 [Signature] Title Dist. Drlg. Supv. Date 12/1/75

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: