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NEW MEXICO OIL CONSERVATION COMMISSION

30-025-26527

Form C-101
Revised 1-1-65

5A. Indicate Type of Lease

STATE ☐

FEE ☒

5. State Oil & Gas Lease No.

"CORRECTED REPORT"

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Firm or Lease Name W. F. Hanagan	
2. Name of Operator ARCO Oil and Gas Company Division of Atlantic Richfield Company		9. Well No. 5	
3. Address of Operator Box 1710, Hobbs, New Mexico		10. Field and Pool, or Wildcat Jalmat Yates 7Rivers	
4. Location of Well UNIT LETTER N LOCATED 760 FEET FROM THE South LINE AND 2080 FEET FROM THE West LINE OF SEC. 12 TWP. 25S RGE. 36E NMPM		12. County Lea	
19. Proposed Depth 3200'		19A. Formation Yates 7Rivers	
21. Elevations (Show whether DF, RT, etc.) 3150.6' GL		22. Rotary or C.T. Rotary	
21A. Kind & Status Plug. Bond GCA #8		22. Approx. Date Work will start 11/1/79	
21B. Drilling Contractor Not selected			

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
11"	8-5/8"	32# K-55	1100'	525	Circ to surf
1-7/8"	5 1/2" OD	15.5# K-55	3200'	1025	Circ to surf

This is a corrected report to correct location of well footage.

Propose to drill a development well to further develop and recover remaining reserves.

Blow out preventer program 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.

Signed [Signature] Title Dist. Drlg. Supt. Date 10/30/79

(This space for State Use)

APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT 1 DATE NOV - 2 1979

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
NOV -1 1970
O.C.D. HOBBS, OFFICE