

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

30-025-30231

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒

DEEPEN ☐

PLUG BACK ☐

b. TYPE OF WELL

OIL
WELL ☐

GAS
WELL ☐

OTHER Water injection ☒

SINGLE
ZONE

MULTIPLE
ZONE ☐

2. NAME OF OPERATOR

Sirgo-Collier, Inc.

3. ADDRESS OF OPERATOR

P. O. Box 3531, Midland, Texas 79702

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)*

At surface

Unit C, 330 FNL 2360 FWL, Sec. 31, T24S, R38E

At proposed prod. zone

Same

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

7 mi NE Jal

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.
(Also to nearest drlg. unit line, if any)

2360'

16. NO. OF ACRES IN LEASE

2560

17. NO. OF ACRES ASSIGNED
TO THIS WELL

40

18. DISTANCE FROM PROPOSED LOCATION*

TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

825'

19. PROPOSED DEPTH

4000'

20. ROTARY OR CABLE TOOLS

Rotary

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

3108' GR

22. APPROX. DATE WORK WILL START*

January 25, 1988

23. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12-1/4"	8-5/8"	24#	400'	250 sx, circ to surface
7-7/8"	5-1/2"	15.5#	4000'	1200 sx, circ to surface

Queen zone will be selectively perforated and stimulated as needed for optimum injectivity.

ATTACHED: 1. Well location and acreage dedication plat.
2. Supplemental drilling data.
3. Surface use plan.

Subject to
Like Approval
by State

RECEIVED

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. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

24.

SIGNED Amey L. Whitley TITLE Agent DATE January 8, 1988

(This space for Federal or State office use)

PERMIT NO. _____ APPROVAL DATE _____

APPROVED BY _____ TITLE _____ DATE 2 11 88

CONDITIONS OF APPROVAL, IF ANY:

718L-2462

*See Instructions On Reverse Side

RECEIVED
FEB 12 1988
CCO
HOBBBS OFFICE