State of New Mexico y, Minerals & Natural Resources Department

District I PO Box 1980, Hobbs, NM 88241-1980 District II PO Drawer DD, Artesia, NM 88211-0719 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV

Date:

06-03-96

## **OIL CONSERVATION DIVISION** P.O. Box 2088 Santa Fe, NM 87504-2088

Form C-101 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office State Lease - 6 Copies Fee Lease - 5 Copies

| PU Box 2088, Santa Fe, NM 8/304-2088  |             |             |                               |                         |              |   |                |                     | AMEN            | MENDED REPORT             |  |
|---|-------------|-------------|-------------------------------|-------------------------|--------------|---|----------------|---------------------|-----------------|---------------------------|--|
| APPLIC  | CATION      | FOR PI      | ERMIT T                       | O DRII                  | LL, RE-EN    | TER, DEI                                    | E <b>PEN</b> , | PLUGBAC             | K, OR ADI       | ) A ZONE                  |  |
| <sup>1</sup> Operator name and Address  |             |             |                               |                         |              |   |                |                     | •               | <sup>2</sup> OGRID Number |  |
| ARCO Permian  |             |             |                               |                         |              |   |                |                     | 000990          |                           |  |
| P.O.BOX 1610  |             |             |                               |                         |              |   |                |                     |                 | 3 API Number              |  |
| MIDLAND, TX 79702   |             |             |                               |                         |              |   |                |                     |                 | 30-025-33470              |  |
| 4 Pro   | operty Code |             | <sup>5</sup> Property Name    |                         |              |   |                |                     |                 | <sup>6</sup> Well Number  |  |
| 1543  |             |             |                               |                         | IDA          | WIMBERL                                     | WIMBERLEY      |                     |                 | 22                        |  |
| <sup>7</sup> Surface Location   |             |             |                               |                         |              |   |                |                     |                 |                           |  |
| UL or lot no.   | Section     | Township    | Range                         | Lot. Idn                | Feet from th | ne North/S                                  | outh Line      | Feet from the       | East/West line  | County                    |  |
| F   | 25          | 25S_        | 37E                           | <u> </u>                | 1650         |   |                | 1650                | WEST            | LEA                       |  |
| 8 Proposed Bottom Hole Location If Different From Surface   |             |             |                               |                         |              |   |                |                     |                 |                           |  |
| UL or lot no. Section Townsh  |             | Township    | Range Lot. Idn                |                         | Feet from th | ne North/S                                  | outh Line      | Feet from the       | East/West line  | County                    |  |
| 9 Proposed Pool 1   |             |             |                               |                         |              | 10 Proposed Pool 2                          |                |                     |                 |                           |  |
| WILDCAT   |             |             |                               |                         |              |   |                |                     |                 |                           |  |
| 11 Work Type Code 12  |             |             | Well Type Code 13 Cabl        |                         |              | /Rotary 14 Lea                              |                | ase Type Code 15 Gr |                 | Ground Level Elevation    |  |
| N   |             |             | G                             |                         | R            |   |                | P                   | 30              | 3060 GR                   |  |
| 16 Multiple   |             |             | 17 Proposed Depth             |                         |              | 18 Formations 19                            |                | Contractor 20 S     |                 | pud Date                  |  |
|   | NO          |             | 6800 A                        |                         |              | 80  |                | 06-15-96            |                 |                           |  |
| 21 Proposed Casing and Cement Program   |             |             |                               |                         |              |   |                |                     |                 |                           |  |
| Hole Size   |             | Cas         | Casing Size Casing weight/foo |                         |              | Setting Depth Sacks of Cemer                |                |                     | t Estimated TOC |                           |  |
| 12 1/4  |             | 8           | 8 5/8                         |                         | 24           |   | 1000           |                     |                 | SURF                      |  |
| 7_7/8   |             | 5           | 5 1/2                         |                         | _15.5        |   |                | 650                 |                 | 1800                      |  |
|   |             |             |                               |                         |              |   |                |                     |                 |                           |  |
|   |             | <del></del> |                               | <u> </u>                |              |   | -              |                     |                 |                           |  |
| Describe the proposed program. If this application is to DEEPEN or PLUG BACK give the data on the present productive zone and proposed new productive zone. Describe the blowout prevention program, if any. Use additional sheets if necessary  OPER. OGRID NO |             |             |                               |                         |              |   |                |                     |                 |                           |  |
| POOL CODE   |             |             |                               |                         |              |   |                |                     |                 |                           |  |
| EFF. DATE 6-4-96 Permit Expires 1 Year From Approval  |             |             |                               |                         |              |   |                |                     |                 | (pprovai                  |  |
| API NO. 30-025-33470  Permit Expires 1 Year 1  Date Unless Drilling Underway  |             |             |                               |                         |              |   |                |                     |                 | rway                      |  |
| <sup>23</sup> I hereby certify that the information given above is true and complete to the best of my knowledge and belief.  |             |             |                               |                         |              | OIL CONSERVATION DIVISION                   |                |                     |                 |                           |  |
| Signature: Ken W Sosnell  |             |             |                               |                         |              | Approved by: SECINAL SIGNED BY JERRY SEXTON |                |                     |                 |                           |  |
| Printed name: KEN W. GOSNELL  |             |             |                               |                         |              | Title: DISTRICT I SUPERVISOR                |                |                     |                 |                           |  |
| Title: AGENT  |             |             |                               |                         |              | Approval Datiin 0 4 1996 Expiration Date:   |                |                     |                 |                           |  |
| Date:   | Phone:      |             |                               | Conditions of Approval: |              |   |                |                     |                 |                           |  |

Attached

915 688-5672

