

NM000 - 10000
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BLM - 10000UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

5. LEASE DESIGNATION AND SERIAL NO.

NM 0155494-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Winkler-Federal

9. WELL NO.

17

10. FIELD AND POOL, OR WILDCAT

Cato San Andres

11. SEC., T., R., M., OR BLK.
AND SURVEY OR AREA

Sec. 31, T-8-S, R-30-E

12. COUNTY OR PARISH

Chaves

13. STATE

New Mexico

1a. TYPE OF WORK

DRILL ☒DEEPEN ☐PLUG BACK ☐

b. TYPE OF WELL

OIL
WELL ☒GAS
WELL ☐

OTHER

SINGLE
ZONE ☒MULTIPLE
ZONE ☐

2. NAME OF OPERATOR

Sinclair Oil & Gas Company

3. ADDRESS OF OPERATOR

P. O. Box 1470, Midland, Texas

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

660' From North and East lines

At proposed prod. zone

As above

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

15. DISTANCE FROM PROPOSED*

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

16. NO. OF ACRES IN LEASE

1840

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.

19. PROPOSED DEPTH

3600

20. ROTARY OR CABLE TOOLS

Rotary

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

22. APPROX. DATE WORK WILL START*

When approved

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
11"	8-5/8" OD	20	300	200 sacks
7-7/8"	4-1/2" OD	9.5	3600	300 sacks

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. J. M. Anderson SIGNED Region Regulatory Engineer DATE 11-27-67

(This space for Federal or State office use)

PERMIT NO. _____

APPROVAL DATE _____

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions On Reverse Side

Orig & cc: USGS Roswell, cc: Regional Office, cc: file