ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-101
Revised 10-1-78

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LAND OFFICE		
OPERATOR		

Correct Location

5A. Indicate Type of Lease: STATE [X] FEE [ ]

5. State Oil & Gas Lease No.: LG-1520

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work

DRILL [X] DEEPEN [ ] PLUG BACK [ ]

7. Unit Agreement Name

b. Type of Well

OIL WELL [X] GAS WELL [ ] OTHER SINGLE ZONE [ ] MULTIPLE ZONE [ ]

8. Farm or Lease Name: Cone State

2. Name of Operator: Yates Petroleum Corporation

9. Well No.: 3

3. Address of Operator: 207 S. 4th, Artesia, New Mexico 88210

10. Field and Pool, or Wildcat: Undes. ~~Tomahawk SA~~ Tom-Tom

4. Location of Well: UNIT LETTER J LOCATED 2310 FEET FROM THE North LINE AND 1650 FEET FROM THE East LINE OF SEC. 2 TWP. 8S RGE. 31E NMPM

12. County: Chaves

19. Proposed Depth	19A. Formation	20. Rotary or C.T.
appr. 4250'	San Andres	Rotary

21. Elevations (Show whether DF, RT, etc.)	21A. Kind & Status Plug. Bond	21B. Drilling Contractor	22. Approx. Date Work will start
4354.1' GL	Blanket	LaRue Drilling Co.	ASAP

23. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/2"	8 5/8"	24#	appr. 1550'	500 sx	circ
7 7/8"	4 1/2"	9.5#	TD	300 sx	

We propose to drill and test the San Andres formations. If commercial, 4 1/2" production casing will be run and cemented with an adequate cover, perforate and stimulate as needed for production.

MUD PROGRAM: Native mud to 1550'. FW to TD.

BOP PROGRAM: BOP's will be installed at 1550' and tested daily.

Waid

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 Mercedes Kostyu Title Regulatory Agent Date 11/16/83

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE _____ DATE JAN 3 1984

CONDITIONS OF APPROVAL, IF ANY: