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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101  
Revised 1-1-65

5A. Indicate Type of Lease  
STATE ☐ FEE ☒  
5. State Oil & Gas Lease No.

## APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator AMOCO PRODUCTION COMPANY		8. Farm or Lease Name BROWN
3. Address of Operator BOX 367, ANDREWS, TEXAS 79714		9. Well No. 1
4. Location of Well UNIT LETTER C LOCATED 330' FEET FROM THE NORTH LINE AND 1655 FEET FROM THE WEST LINE OF SEC. 19 TWP. 5-S RGE. 33-E NMPM		10. Field and Pool, or Wildcat PETERSON-FUSSELMAN
11. Proposed Depth 8000'		12. County ROOSEVELT
19A. Formation FUSSELMAN		20. Rotary or C.T. ROTARY
21. Elevations (Show whether DT, RT, etc.) 4419' GL	21A. Kind & Status Plug. Bond BLANKET- ON FILE	22. Approx. Date Work will start 5-1-76

## PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/4 - 11"	8 5/8"	24#	2000'	Circulate	
7 7/8"	5 1/2"	14 to 17#	8000'	Sufficient to fill 600'	
				above uppermost pay.	

BOP 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.

Signature [Signature] Title ADMINISTRATIVE ASSISTANT Date MAR 26 1976

(This space for State Use)

APPROVED BY [Signature] TITLE [Signature] DATE [Signature]  
CONDITIONS OF APPROVAL, IF ANY:  
1- SUSP  
1- RRY  
1- PHILLIPS

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OIL CONSERVATION COMM.  
HOBBBS, N. M.

NEW MEXICO OIL CONSERVATION COMMISSION  
WELL LOG ON AND ACREAGE DEDICATION PLAT

Form C-122  
Supersedes C-128  
Effective 1-1-65

All distances must be from the outer boundaries of the Section

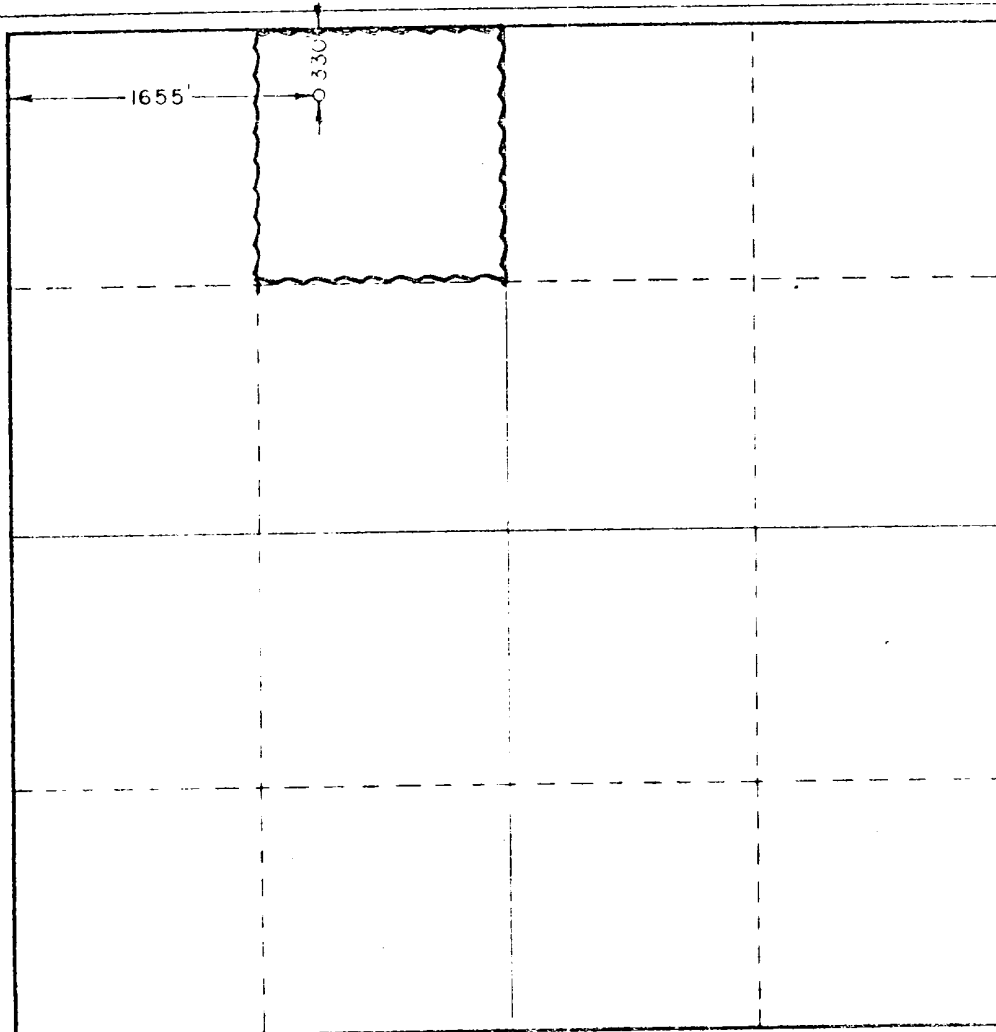
Operator <b>Amoco Production Company</b>			Lease <b>Brown</b>		Well No. <b>1</b>
Tract Letter <b>C</b>	Section <b>19</b>	Township <b>5 South</b>	Range <b>33 East</b>	County <b>Roosevelt</b>	
Actual Well Location of Wells					
<b>330</b> feet from the <b>North</b> line and		<b>1655</b> feet from the <b>West</b> line			
Ground Level Elev. <b>4419.1</b>	Producing Formation <b>FUSSELMAN</b>	Pool <b>PETERSON-FUSSELMAN</b>	Leasehold Acreage <b>40</b>		

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation \_\_\_\_\_

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



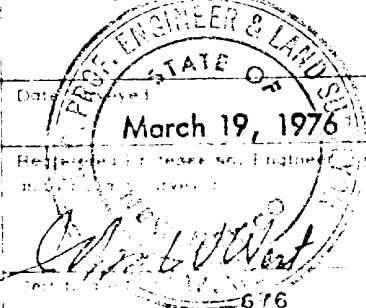
CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief

*Roy R. Yorkum*  
ADMINISTRATIVE ASSISTANT

AMOCO PRODUCTION COMPANY

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision and that the same is true and correct to the best of my knowledge and belief.



0 330 660 990 1320 1650 1980 2310 2640 2970 3300 3630 3960 4290 4620 4950 5280 5610 5940 6270 6600

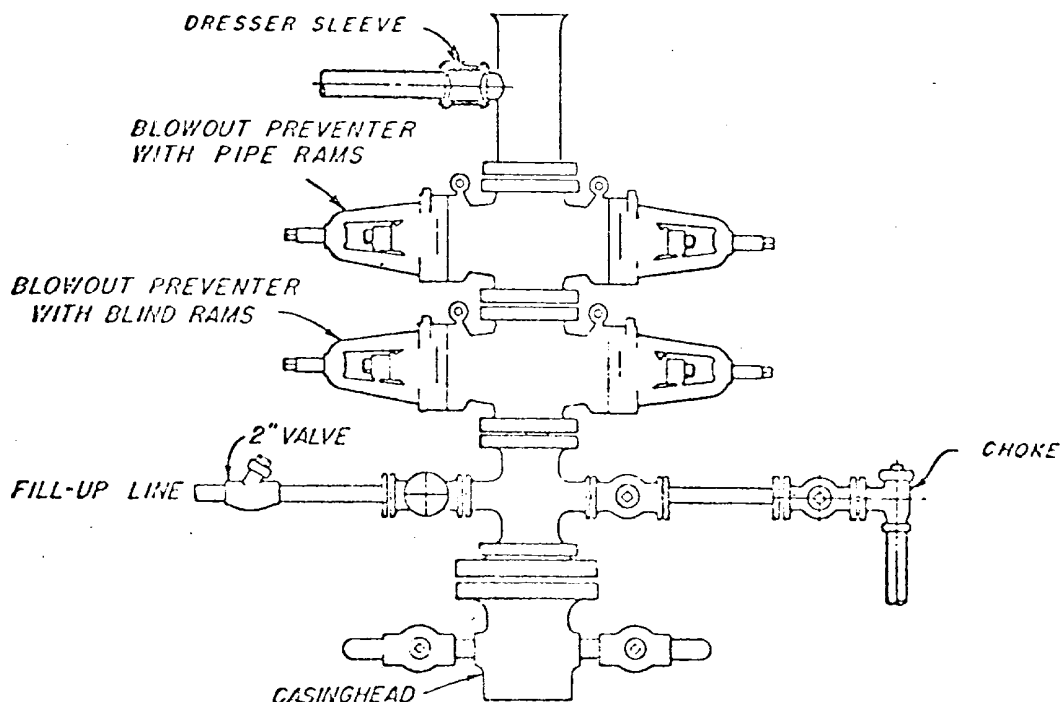
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HOBBBS, H. H.

1. BLOW-OUT PREVENTERS AND MASTER VALVE MAY BE MANUAL OPERATED.
2. ALL FITTINGS MUST BE IN GOOD CONDITION, 2,000# W.P. (4,000 P.S.I. TEST), MINIMUM.
3. NIPPLE ABOVE BLOW-OUT PREVENTER SHALL BE SAME SIZE AS CASING BEING DRILLED THROUGH.
4. KELLY COCK TO BE INSTALLED ON KELLY.
5. CMSCO OR COMPARABLE SAFETY VALVE MUST BE AVAILABLE ON RIG FLOOR AT ALL TIMES WITH PROPER CONNECTION OR SUB, 2,000# W.P. (4,000 P.S.I. TEST), MINIMUM.
6. RAMS IN PREVENTERS WILL BE INSTALLED AS FOLLOWS:
 

TOP PREVENTOR	-	DRILL PIPE OR CASING RAMS
BOTTOM PREVENTER	-	BLIND RAMS OR MASTER VALVE.
7. SPGOL OR CROSS MAY BE ELIMINATED IF CONNECTIONS ARE AVAILABLE IN THE LOWER PART OF THE BLOW-OUT PREVENTER BODY.
8. DOUBLE OR SPACE SAVER TYPE PREVENTERS MAY BE USED IN LIEU OF TWO SINGLE PREVENTERS.
9. CROSS WITH SIDE OUTLETS MAY BE PLACED BETWEEN MASTER GATE AND BLOW-OUT PREVENTER IF TWO SINGLE UNITS ARE USED.



BLOWOUT PREVENTER HOOK-UP  
2,000 psi Working Pressure  
EXHIBIT D-2

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HOESB. N. M.