RELEVED

Submit to Appropriate
District Office
State Lease - 6 copies

State of New Mexico

Energy, Minerals and Natural Resources Department JUL - 6 1992

Form C-101 Revised 1-1-89

Fee Lease - 5 copies	ATT 6		** ********		
DISTRICT I P.O. Box 1980, Hobbs, NM				APINO (assigned by O	CD on New Wells) - 27145
DISTRICT II P.O. Drawer DD, Ariesia, NM 88210 Santa Fe, New Mexico 87504-2088				5. Indicate Type of Lea	STATE FEE X
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410				6. State Oil & Gas Lea	se No.
APPLICAT	ION FOR PERMIT T	O DRILL, DEEPEN, C	R PLUG BACK		
1a. Type of Work: 7. Lease Name or Unit Agreement Name					
DRILL	X RE-ENTER	DEEPEN	PLUG BACK		
b. Type of Well:	X X KE-LITEK		_		
OIL GAS WELL OTHER SINGLE MULTIFLE ZONE X ZONE				Little Peco	s Valley
2 Name of Operator Collins & Ware, Inc.				8. Well No.	
3. Address of Operator				9. Pool name or Wildcat	
303 W. Wall, Ste 2200, Midland, TX 79701				x Culebra Blu	If I Was Delaware
4. Well Location Unit Letter D	: 550 Feet Fr	om The North	Line and 99	O Feet From The	West Line
Unit Letter D	: <u>550</u> Feet Fro	An the NOLCH		rea rioni file	Line
Section 7	Townsh	ip 24-S Rar	29-E	NMPM Eddy	County
Section /	10W1187			//////////////////////////////////////	7777777777777
		10. Proposed Depth	11. 1	Formation	12. Rotary or C.T.
		6700	·	elaware	Rotary
13. Elevations (Show whether	er DF, RT, GR, etc.)	l. Kind & Status Plug. Bond	15. Drilling Contractor		x. Date Work will start
2970' GR	21 11.17 51.17 61.07	Blanket	To Be Select	1	n Approval
17.	PRO	OPOSED CASING AN			
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMEN	IT EST. TOP
12.25"	8.625"	24#	650'	400	circulate
7,875"	4.5"	15.5-17#	6700'	1200	circulate 2-stag
producti and aban engineer	ve, 4.5" casing doned in a mannering practice.	ill this well to will be set to er consistent wi	TD. If non-prod th State regula	uctive, the we tions and acco	11 will be plugged rding to prudent Post ID- 7-18-93
				UNLESS DRILLING	
ZONE. GIVE BLOWOUT PREVI	ENTER PROGRAM, IP ANY.			N PRESENT PRODUCTIVE ZONE	E AND PROPOSED NEW PRODUCTIVE
I hereby certify that the inform	nation above is true and complete	to the best of my knowledge and	belief.		
SKINATURE - Mane Comment of Reserve TITLE Agent			DATE _7/2/92		
G. Than e	e Akins	- -			TELEPHONE NO.
(This space for State Use)	ORIGINAL SI				.titi == q 1992

SUPERVISOR DISTRICT IT

CONDITIONS OF APPROVAL, IF ANY: