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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

5A. Indicate Type of Lease	
STATE <input type="checkbox"/>	FEE <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name Carnahan	
2. Name of Operator J. Gregory Marrión and Robert L. Bayless		9. Well No. 1	
3. Address of Operator P. O. Box 1541, Farmington, New Mexico 87401		10. Field and Pool, or Wildcat Undesignated MV	
4. Location of Well UNIT LETTER P LOCATED 990 FEET FROM THE South LINE AND 990 FEET FROM THE East LINE OF SEC. 35 TWP. 30N RGE. 12 W NMPM		12. County San Juan	
19. Proposed Depth 3800		19A. Formation MV (Cliffhouse)	
20. Rotary or C.T. Both		21. Elevations (Show whether DF, RT, etc.) 5911 Gr	
21A. Kind & Status Plug. Bond Statewide		21B. Drilling Contractor L & M Well Service	
22. Approx. Date Work will start February 15, 1972			

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP

Perforated Cliffhouse (Mesaverde) 3766-80 with 28 shots fraced with 500# 20-40 sand and 5000 gallons water I.P. 312 MCF - Waiting Pipeline Connection



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 Emery C. Arnold Title Operator Date April 17, 1972

(This space for State Use)

Original Signed by Emery C. Arnold TITLE SUPERVISOR DIST. #3 DATE APR 18 1972

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: