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U.S.G.S.
LAND OFFICE
OPERATOR

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

5A. Indicate Type of Lease
STATE [X] FEE []
5. State Oil & Gas Lease No.
E-1027
7. Unit Agreement Name
8. Farm or Lease Name
St. of N. Mex. "CZ"
9. Well No.
1
10. Field and Pool, or Wildcat
Ranger Lake Pennsylvania
12. County
Lea
19. Proposed Depth
10,375'
19A. Formation
Cisco
20. Rotary or C.T.
Rotary
21. Elevations (Show whether DF, RT, etc.)
Later
21A. Kind & Status Plug. Bond
\$10,000 blanket
21B. Drilling Contractor
Unknown at present
22. Approx. Date Work will start
At once

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK
1a. Type of Work
b. Type of Well
DRILL [X] DEEPEN [] PLUG BACK []
OIL WELL [X] GAS WELL [] OTHER []
2. Name of Operator
Texaco Inc.
3. Address of Operator
P. O. Box 3109
4. Location of Well
UNIT LETTER J LOCATED 1945 FEET FROM THE South LINE
AND 1945 FEET FROM THE East LINE OF SEC. 14 TWP. 12-S RGE. 34-E NMPM

Table with 6 columns: SIZE OF HOLE, SIZE OF CASING, WEIGHT PER FOOT, SETTING DEPTH, SACKS OF CEMENT, EST. TOP. Rows include 15", 9-5/8", 6-3/4" hole sizes and corresponding casing, weight, depth, and cement data.

- * Cement with 300 sx. Class "C" Neat with accelerator
** Cement with 800 sx. Class "C" 12% gel followed by 200 sx. Class "C" Neat.
*** Install centralizers over pay and first three joints above pay. Cement with 500 sx. Class "C" 8% gel with FRH followed by 200 sx. class "C" 4% gel. Precede cement with 60 Bbls. fresh water. Displace plug with acetic acid.

COMPLETION PROGRAM: Completion to be through perforations with acid for stimulation.

Table with 2 columns: FORMATIONS EXPECTED, Values. Rows include Anhydrite (1992'), Top of salt (2107'), Base of salt (2697'), Yates (2779'), San Andres (4121'), Glorieta (5596'), Tubb (7016'), Abo (7766'), Wolfcamp XX (9271'), Cisco (10000'), Total Depth (10375').

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, STIVE 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 [Signature] Title Division Civil Engineer Date 5/6/65
(This space for State Use)

APPROVED BY [Signature] TITLE DATE
CONDITIONS OF APPROVAL, IF ANY: