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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101

Revised 1-1-65

5A. Indicate Type of Lease	
STATE <input checked="" type="checkbox"/>	FEE <input type="checkbox"/>
5. State Oil & Gas Lease No.	
K6507	

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>		---	
OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name	
2. Name of Operator		9. Well No.	
Coastal States Gas Producing Company		1	
3. Address of Operator		10. Field and Pool, or Wildcat	
P. O. Box 235, Midland, Texas 79701		Undes. Baum (Up. Penn)	
4. Location of Well		12. County	
UNIT LETTER H LOCATED 1980 FEET FROM THE north LINE		Lea	
AND 510 FEET FROM THE east LINE OF SEC. 35 TWP. 13S RGE. 32E NMPM			
19. Proposed Depth		19A. Formation	20. Rotary or C.T.
10,200		Up. Penn	Rotary
21. Elevations (Show whether DF, RT, etc.)	21A. Kind & Status Plug. Bond	21B. Drilling Contractor	22. Approx. Date Work will start
4301.7' GR	Blanket	Robinson Bros.	Upon Approval

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17"	13-3/8"	48#	350'	350	Circ.
11"	8-5/8"	24# & 32#	4100'	300	3000'
7-7/8"	5-1/2"	17#	10,200'	200	8850'

THE COMPLETION MUST BE NOTED
24 HOURS AFTER TO RUNNING 13 3/8
CASING.

APPROVAL VALID
FOR 30 DAYS UNLESS
FURTHER CONTINUED,
EXPIRES 11-27-70

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 Joe E. Hammond Title Division Production Manager Date August 24, 1970

(This space for State Use)

APPROVED BY [Signature] TITLE [Signature] DATE 11-27-70

CONDITIONS OF APPROVAL, IF ANY: