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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 FEE

5. State Oil & Gas Lease No.
B-1520

7. Unit Agreement Name

8. Farm or Lease Name
Bridges State

9. Well No.
128

10. Field and Pool, or Wildcat
Undesignated

12. County
Lea

18. Proposed Depth
8800

19A. Formation
Abo

20. Rotary or C.T.
Rotary

21. Elevations (Show whether Dr, RI, etc.)
4032

21A. Kind & Status Plug. Bond
on file

21B. Drilling Contractor
-

22. Approx. Date Work will start
January 8, 1969

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work

b. Type of Well
DRILL DEEPEN PLUG BACK
OIL WELL GAS WELL OTHER SINGLE ZONE MULTIPLE ZONE

2. Name of Operator
MOBIL OIL CORPORATION

3. Address of Operator
P. O. Box 633, Midland, Texas 79701

4. Location of Well
UNIT LETTER E LOCATED 535 FEET FROM THE East LINE
2005 FEET FROM THE NORTH LINE OF SEC. 23 TWP. 17-S RGE. 34-E NMPM

16. Proposed Depth
8800

19A. Formation
Abo

20. Rotary or C.T.
Rotary

21. Elevations (Show whether Dr, RI, etc.)
4032

21A. Kind & Status Plug. Bond
on file

21B. Drilling Contractor
-

22. Approx. Date Work will start
January 8, 1969

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 - 1/4"	8 - 5/8"	20#	1650'	Circulate	Surface
7 - 7/8"	4 - 1/2"	9.5# & 11.6#	8800'	Circulate	Tie in w/set csg.

MUD PROGRAM

0' - 1650' - Spud Mud
1650' - TD - Brine and oil

LOGGING PROGRAM

0 - TD - GR Neutron

THE COMMISSION MUST BE NOTIFIED
24 HOURS BEFORE THE START OF
CASING

APPROVAL MADE FOR THE DATE OF DRILLING CONTRACT
EXPIRES 4-2-69

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 J.L. Sanders J.L. Sanders title Prof. Engr. Supervisor Date December 26, 1968

(This space for State Use)

APPROVED BY [Signature] TITLE _____ DATE JAN 2 1969

CONDITIONS OF APPROVAL, IF ANY: