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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 <input type="checkbox"/>	FEE <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
8. Farm or Lease Name	
600 E. Myrtle (L. 9/1/71)	
9. Well No.	
2	
10. Field and Pool, or Wildcat	
N. Bagley (Lower) penn	
12. County	
Lea	
19. Proposed Depth	19A. Formation
10,500'	Pennsylvanian
20. Rotary or C.T.	
Rotary	
21. Elevations (Show whether DF, RT, etc.)	21A. Kind & Status Plug. Bond
4298' G. L.	Blanket on file
21B. Drilling Contractor	
Hondo Drilling Co.	
22. Approx. Date Work will start	
upon approval	

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work	
b. Type of Well DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>	
OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>	
2. Name of Operator	
BTA Oil Producers	
3. Address of Operator	
104 S. Pecos Midland, Texas 79701	
4. Location of Well	
UNIT LETTER "P" LOCATED 660' FEET FROM THE South LINE	
AND 510' FEET FROM THE East LINE OF SEC. 31 TWP. 11S RGE. 33E NMPM	
23.	

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17-1/2"	12-3/4	33.38	375'	375	Circ.
12-1/4"	8-5/8	24, 28, 32	4100'	400	
7-7/8"	5-1/2	17	10500'	300	

APPROVAL VALID
FOR 90 DAYS UNLESS
DRILLING COMMENCED,
EXPIRES 2-1-74

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 R. D. Boyce Title R. D. Boyce Production Foreman Date 10/23/73

(This space for State Use)

APPROVED BY [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: