

30-025-27611

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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. LG-1370

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 checked="" 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 State P.H.	
2. Name of Operator ELK OIL COMPANY				9. Well No. 1	
3. Address of Operator P. O. BOX 310, ROSWELL, NEW MEXICO 88201				10. Field and Pool, or Wildcat Dean <i>Lermontov</i>	
4. Location of Well UNIT LETTER <u>P</u> LOCATED <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE OF SEC. <u>26</u> TWP. <u>15S</u> RGE. <u>36E</u> NMPM				12. County Lea	
18. Proposed Depth 11,800				19A. Formation Penn	
20. Rotary or C.T. Rotary				21. Drilling Contractor Hondo	
22. Approx. Date Work will start 11/10/81				23. Elevation (Show whether DF, RI, etc.) 3858 Grd.	
24. Kind & Status Plug. Bond Blanket				25. Elevation (Show whether DF, RI, etc.) 3858 Grd.	

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17	12 3/8	34#	400	500	circ.
12	8 5/8	32/24	4600	2600	circ.
7 7/8	5 1/2	17	11,800	500	9500

BLOWOUT PREVENTION PROGRAM

Size	Series	Make	Number
12"	900S	Cameron QRC	1
10"	900S	Cameron QRC	2
10"	900S	Hydril	
3"	1500S	Choke Manifold	1

THIS ACREAGE IS UNDEDICATED AS TO GAS.

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 4/26/82
UNLESS DRILLING UNDERWAY

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 *[Signature]* Title President Date 10/22/81

(This space for State Signed By)
Jerry Sexton

APPROVED BY Dist 1, Supt. TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: