

Submit to Appropriate
District Office
State Lease - 6 copies
Fee Lease - 5 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

AUG 21 1991

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

API NO. (assigned by OCD on New Wells)
30 015 23287

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:
DRILL ☐ RE-ENTER ☐ DEEPEN ☐ PLUG BACK ☒

b. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator
Southwest Royalties, Inc.

3. Address of Operator
c/o Box 953, Midland, Texas 79702

7. Lease Name or Unit Agreement Name
Malaga

8. Well No.
2

9. Pool name or Wildcat
Loving, East Delaware

4. Well Location
Unit Letter D : 660 Feet From The North Line and 660 Feet From The West Line

Section 2 Township 24-S Range 28-E NMPM Eddy County

10. Proposed Depth
PBD 6330'

11. Formation
Brushy Canyon

12. Rotary or C.T.
Rotary

13. Elevations (Show whether DF, RT, GR, etc.)

14. Kind & Status Plug Bond
Blanket

15. Drilling Contractor
-

16. Approx. Date Work will start
Week of 8-13-91

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
22"	18-5/8"	87.5 #	406'	705 sx	surface
16"	13-3/8"	61 #	2557'	2550 sx	surface
12-1/4"	9-5/8"	40 #	9500'	3300 sx	surface
7-7/8"	5-1/2"	23 #	13050'	1600 sx	8390'

Set CIBP @ 6330', spot 35' cement plug on top.

Perforate Brushy Canyon 6157' - 6231'.

Well purchased from Phillips Petroleum Co. 9-1-90. See C-103's attached for well history since purchase.

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 BLOW-OUT PREVENTER PROGRAM, IF ANY.

I hereby certify that the information above is true and correct to the best of my knowledge and belief.

SIGNATURE Mike Williams TITLE Agent DATE 8-20-91

TYPE OR PRINT NAME _____ (915) TELEPHONE NO 684-6381

(This space for State Use) ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

APPROVED BY _____ TITLE _____ DATE AUG 30 1991

CONDITIONS OF APPROVAL, IF ANY: