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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.
OG 4650

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input checked="" 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"/>		8. Farm or Lease Name Sunray B	
2. Name of Operator B T A Oil Producers		9. Well No. 1	
3. Address of Operator 104 South Pecos, Midland, Texas 79701		10. Field and Pool or Wildcat UNDESIGNATED Vada-Pem.	
4. Location of Well UNIT LETTER F LOCATED 1980 FEET FROM THE North LINE AND 1980 FEET FROM THE West LINE OF SEC. 36 TWP. 9-S RGE. 36-E NMPM		12. County Lea	
19. Proposed Depth 9850		19A. Formation Pennsylvanian	20. Rotary or C.T. None
21. Elevations (Show whether DF, RT, etc.) 4274' G.L.	21A. Kind & Status Plug. Bond Blanket on File	21B. Drilling Contractor Well Units Inc.	22. Approx. Date Work will start on approval

23. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
18"	13 3/8"	NA	352'	360 360	circulate
12 1/4"	8 5/8"	32#	4029'	1900	circulate
8 3/4"	5 1/2"	17#	9857'	340	8500'

Drilled in 1958
Formerly Sunray Lane SWD-1 ---to be plugged back and recompleted
in Bough "C" formation to produce oil.

Per telephone R.L. Halverson to Joe Ramey 12/6/68.

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 **Production Supt.** Date **12/7/68**

(This space for State Use)

APPROVED BY *[Signature]* TITLE **SUPERVISOR DISTRICT**

CONDITIONS OF APPROVAL, IF ANY:

DATE