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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

REVISED

5A. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
5. State Oil & Gas Lease No. 06-671
7. Unit Agreement Name
8. Farm or Lease Name State of New Mexico "E"
9. Well No. 4
10. Field and Pool, or Wildcat Mescalero-San Andres
12. County Lea
19. Proposed Depth 4700'
19A. Formation Milnesand
20. Rotary or C.T. Rotary
21. Elevations (Show whether DF, RT, etc.) 4311' (Ground)
21A. Kind & Status Plug. Bond \$10,000 Blanket Bond
21B. Drilling Contractor Cactus Drilling Co.
22. Approx. Date Work will start 2-11-65

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 Sun Oil Company					
3. Address of Operator P.O. Box 2880, Dallas, Texas 75221					
4. Location of Well UNIT LETTER "F" LOCATED 1650' FEET FROM THE West LINE AND 1650.4 FEET FROM THE North LINE OF SEC. 26 TWP. 10S RGE. 32E NMPM					
23.					

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#	1550'	400	Ground Surface
7 7/8"	4 1/2"	9.5#	4700'	400	2000'

We expect to set and cement 1550' of 8 5/8" surface casing and 4700' of 4 1/2" Oil String, using sufficient cement to adequately protect any oil or gas shows. The principal objective of this well is the Upper Milnesand-San Andres oil horizon, but the Lower Milnesand has possibilities of oil production.

NOTE: Location was moved 330.4' North of original location, which was approved January 11, 1965

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 (A. S. Rhee) Title Division Superintendent Date February 4, 1965
(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: