NO. OF COPIES RECEIVED		_									
DISTRIBUTION			NEW MEXICO OIL CONSERVATION COMMISSION						Form C-101		
SANTA FE									A	Kerifeg 1-1-	• •
FILE											e Type of Lease
U.S.G.S.										STATE	
LAND OFFICE										.5. State Oil	& Gas Lease No.
OPERATOR										<u>06-4</u> 3	303
A	PLICATI	ON FO	DR PER	MIT TO	DRILL,	DEEPEN	I, OR PLUG	BACK			
1a. Type of Work										7. Unit Agre	eement Name
	DRILL			DEEPEN			PLUG BACK				
b. Type of Well				DEEPEN			PLUG BACK			8. Farm or Lease Name	
WELL X	GAS WELL		OTHE				SINGLE ZONE	м	ZONE	New Mex	cico State CA
2. Name of Operator										9. Well No.	
HUMBLE OIL & REFINING COMPANY								#1			
3. Address of Opera	rtor									10. Field and Pool, or Wildcat	
BOX 1.0	500, MI	DLANI	D, TEX	AS						South I	ane Wildcat
4. Location of Well		· _			TED	500	FEET FROM TH	Nort	h LINE		
		· - · ·									
and 500	FEET FRO	MTHE	West	LINE	OF SEC.	35	тир. 10-5	RGE. 3	3-E NMPM		
		. <i>111</i>		//////		//////				12. County	
VIIIIIII	//////	1111	/////	//////	()))					Lea	
	IIIII	\overline{III}	\overline{M}	IIIII	IIII			/////			
	//////		/////		/////			111111			
	IIIII	\overline{M}	\overline{IIII}	IIIII	\overline{IIII}	IIIII	19. Proposed	Depth	19A. Formation	n	20. Hotary or C.T.
					13,500 D		Devonia	n Ó	Rotary		
21. Elevations (Show whether DF, RT, etc.)			etc.)	21A. Kind & Status Plug. Bond			21B. Drilling Contractor			22. Approx	x. Date Work will start
To be filed later				Blanket on file Unknown				9-20	D -6 5		
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"	13-3/8"		350'	250 sacks	Surface*
11"	8-5/8"		4100'	750 sacks	Circ. to 2500'
7-7/8"	4-1/2"		Total Depth	800 sacks	**

*Circulate cement to surface. **Circulate to approximately 8000' to cover all producing formation.

1-50' core in the Strawn Formation 1-50' core in the Devonian Formation.

Min. mud for samples. HOWCO method of cementing to be used.

and the second
and the second second
DRILLING COMMENCED,
DRILLING, COMMERCE
EVDIDES
SAFINES

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUC-TIVE ZONE, GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

I hereby certify that the information above is true and complexity signed	ete to the best of my knowledge and belief. TitleAdm. Spec.	Date9-12-65
(This space for State Use)	_	:
APPROVED BY	TITLE	, ,,

CONDITIONS OF APPROVAL, IF ANY: