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# NEW MEXICO OIL CONSERVATION COMMISSION

DEC 28 1 17 PM '65

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.	
OG-5083	

## APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>			
b. Type of Well		8. Farm or Lease Name	
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"/>		Southern Minerals State 21	
2. Name of Operator		9. Well No.	
Coastal States Gas Producing Company		4	
3. Address of Operator		10. Field and Pool, or Wildcat	
Box 2498, Abilene, Texas		Flying "M" San Andres	
4. Location of Well		12. County	
UNIT LETTER <u>H</u> LOCATED <u>1978</u> FEET FROM THE <u>North</u> LINE AND <u>860</u> FEET FROM THE <u>East</u> LINE OF SEC. <u>21</u> TWP. <u>9 S</u> RCE. <u>33 E</u> NMPM		Lea	
19. Proposed Depth		19A. Formation	
4600		San Andres	
20. Rotary or C.T.		Rotary	
21. Elevations (Show whether DF, RT, etc.)		22. Approx. Date Work will start	
4355 GL		Upon approval	
21A. Kind & Status Plug. Bond		21B. Drilling Contractor	
Filed			

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	24#	250	200	Circ.
7 7/8	4 1/2	9.5#	4600	300	3300

APPROVAL FOR 90 DAYS OF DRILLING COMMENCED  
EXPIRES 3/24/66

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. L. Smith Title Agent Date December 28, 1965

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: