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NEW MEXICO OIL CONSERVATION COMMISSION

ROBBS OFFICE O. C. C.

Form C-101
Revised 1-1-65

APR 28 10 33 AM '66

5A. Indicate Type of Lease	
STATE <input checked="" type="checkbox"/>	FEE <input type="checkbox"/>

5. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work			7. Unit Agreement Name		
b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input checked="" type="checkbox"/>			8. Firm or Lease Name State "AI"		
2. Name of Operator TEXAS PACIFIC OIL COMPANY			9. Well No. 1		
3. Address of Operator P. O. Box 1069; Hobbs, New Mexico			10. Field and Pool, or Wildcat Undesignated		
4. Location of Well UNIT LETTER <u>P</u> LOCATED <u>660'</u> FEET FROM THE <u>South</u> LINE AND <u>660'</u> FEET FROM THE <u>East</u> LINE OF SEC. <u>20</u> TWP. <u>10-S</u> RGE. <u>33-E</u> NMPM			12. County Lea		
21. Elevations (Show whether DF, RT, etc.) 4250'			21A. Kind & Status Plug. Bond Req. bond on file		21B. Drilling Contractor Not selected
22. Approx. Date Work will start Upon approval			20. Rotary or C.T. Rotary		

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"	48#	350'	500 sks.	Circ.
11" or 12-1/4"	8-5/8"	32#	4600'	Tie in to base of salt.	
7-7/8"	5-1/2"	17#-15.5#	10,200'	300 sks.	

APPROVAL VALID
30 DAYS UNLESS
DRILLING COMMENCED
EXPIRES 7/27/66

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 Robert D. Sarg Title Area Superintendent Date 4-27-66

(This space for State Use)

APPROVED BY [Signature] TITLE [Signature] DATE [Signature]

CONDITIONS OF APPROVAL, IF ANY: