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OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION Form C-101  
Revised 1-4-65

MAY 19 8 56 AM '66

5A. Indicate Type of Lease	
STATE <input checked="" type="checkbox"/>	FEE <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
8. Farm or Lease Name <b>Bell "A"</b>	
9. Well No. <b>1</b>	
10. Field and Pool, or Wildcat <b>Undes. No. Bagley</b>	
12. County <b>Lea</b>	
19. Proposed Depth <b>10,800</b>	19A. Formation <b>Upper Penn</b>
20. Rotary or C.T. <b>Rotary</b>	
21. Elevations (Show whether DF, RT, etc.)	21A. Kind & Status Plug. Bond <b>Blanket</b>
21B. Drilling Contractor <b>Forester Drig. Co.</b>	
22. Approx. Date Work will start <b>Upon Approval</b>	

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK			
1a. Type of Work DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>			
b. Type of Well 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 <b>Stoltz &amp; Company</b>			
3. Address of Operator <b>c/o Oil Reports &amp; Gas Services, Box 763, Hobbs, New Mexico</b>			
4. Location of Well UNIT LETTER <b>C</b> LOCATED <b>720</b> FEET FROM THE <b>North</b> LINE AND <b>1980</b> FEET FROM THE <b>West</b> LINE OF SEC. <b>21</b> TWP. <b>11 S</b> RGE. <b>33 E</b> 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	10 3/4	32.75#	350	Circulated	
9 3/4	8 5/8	24#	3750	175	2200
6 3/4	4 1/2	11.6#	10,800	300	8000

APPROVAL VALID  
FOR 90 DAYS UNLESS  
DRILLING COMMENCED.  
EXPIRES **8-18-66**

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 **H. L. Smith** Title **Agent** Date **May 18, 1966**

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: