

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

3-02122143

5A. Indicate Type of Lease
STATE FEE

5. State Oil & Gas Lease No.
K-4690

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
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 _____ SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name State	
2. Name of Operator Hanagan Petroleum Corporation		9. Well No. 1	
3. Address of Operator P. O. Box 1737, Roswell, New Mexico		10. Field and Pool, or Wildcat Lazy #J	
4. Location of Well UNIT LETTER K LOCATED 1650 FEET FROM THE South LINE AND 2310 FEET FROM THE West LINE OF SEC. 21 TWP. 13S RGE. 33E NMPM		12. County Lea	
19. Proposed Depth 9900'		19A. Formation Permo-Penn.	20. Rotary or C.T. Rotary
21. Elevations (Show whether DF, RT, etc.) 4256 GR	21A. Kind & Status Plug. Bond Statewide @ Santa Fe	21B. Drilling Contractor McVay Drig. Co.	22. Approx. Date Work will start 2/23/68

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
15	11 3/4	42#	350	300	circulated
11	8 5/8	24 & 32#	4000	600	Base salt
7 7/8	5 1/2	15.5 & 17.5	9900	400	

Proper blowout preventor equipment will be used.

APPROVAL VALID
FOR 90 DAYS UNLESS
DRILLING COMMENCED
EXPIRES **5-23-68**

WORK MUST BE COMPLETED
72 HOURS PRIOR TO RUNNING **11 3/4**
CASING

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 Hugh E. Hanagan Title Vice President Date February 22, 1968

(This space for State Use)

APPROVED BY Joe [Signature] TITLE SUPERVISOR DISTRICT # DATE [Signature]

CONDITIONS OF APPROVAL, IF ANY: