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## NEW MEXICO OIL CONSERVATION COMMISSION

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SEP -3 1985

O. C. D.  
ARTESIA, OFFICE

Form C-101  
Revised 1-1-65

5A. Indicate Type of Lease

STATE ☐

FEE ☒

5. State Oil &amp; Gas Lease No.

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

1a. Type of Work

DRILL ☒

DEEPEN ☐

PLUG BACK ☐

7. Unit Agreement Name

8. Farm or Lease Name

Plains 6

9. Well No.

3

10. Field and Pool, or Wildcat

Race Track San Andres

2. Name of Operator

Cibola Energy Corporation

3. Address of Operator

P. O. Box 1668, Albuquerque, New Mexico 87103

4. Location of Well

UNIT LETTER N LOCATED 990 FEET FROM THE South LINE

AND 2310

FEET FROM THE West LINE OF SEC. 6 TWP. 10S RGE 28E NMPM

12. County

Chaves

19. Proposed Depth

2300'

19A. Formation

San Andres

20. Rotary or C.T.

Rotary

21. Elevations (Show whether DF, RT, etc.)

3827.7

21A. Kind &amp; Status Plug. Bond

Statewide

21B. Drilling Contractor

Salazar Drilling

22. Approx. Date Work will start

Sept 1, 1985

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"	23#	320	200 sx	surface
6 1/2"	4 1/2"	9.5#	2300'	120 sx	1500'

We plan to drill a 10" hole to 320' and set 8 5/8" casing. 8 5/8" casing will be cemented with 200 sx Class C cement circulated to surface. A 6 1/2" hole will be drilled to approx 2300'. Logs will be run and 4 1/2" casing will be set or the well will be P & A'd depending on the outcome of the logs.

APPROVAL VALID FOR 180 DAYS  
PERMIT EXPIRES 3-9-86  
UNLESS DRILLING UNDERWAY

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 Karen Azar Title Drilling Secretary Date 8/26/85

(This space for State Use)

Original Signed By  
Mike Williams  
Oil & Gas Inspector

DATE

SEP 4 1985

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY: