

Submit to Appropriate District Office
 State Lease - 6 copies
 Fee Lease - 5 copies

State of New Mexico
 Energy, Minerals and Natural Resources Department

Form C-101
 Revised 1-1-89

OIL CONSERVATION DIVISION
 P.O. Box 2088
 Santa Fe, New Mexico 87504-2088

DISTRICT I
 P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
 P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
 1000 Rio Brazos Rd., Aztec, NM 87410

API NO. (assigned by OCD on New Wells)

30-005-63005

5. Indicate Type of Lease

STATE

FEE

6. State Oil & Gas Lease No.

V-2924

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL RE-ENTER DEEPEN PLUG BACK

b. Type of Well:

OIL WELL GAS WELL OTHER
 SINGLE ZONE MULTIPLE ZONE

7. Lease Name or Unit Agreement Name

J. Horton State

2. Name of Operator

Collins Oil & Gas Corporation

8. Well No.

1

3. Address of Operator

P.O. Box 2443, Roswell, NM 88202-2443

9. Pool name or Wildcat

SE Acme San-Andres Pool

4. Well Location

Unit Letter P : 330 Feet From The South Line and 330 Feet From The East Line

Section 2 Township 8-S Range 27E NMPM Chaves County

10. Proposed Depth

2180

11. Formation

San-Andres

12. Rotary or C.T.

Rotary

13. Elevations (Show whether DF, RT, GR, etc.)

3955 GL

14. Kind & Status Plug Bond

Blanket

15. Drilling Contractor

United

16. Approx. Date Work will start

2-27-94

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/2"	8-5/8"	24	400	sufficient to circulate	
7-7/8"	4 1/2"	10.50	2180	200 sxs.	

*Part 7D-1
 2-25-94
 New loc & API*

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.

SIGNATURE Roy D. Collins TITLE Pres. Collins Oil & Gas Corp DATE 2-25-94

TYPE OR PRINT NAME ROY D. COLLINS TELEPHONE NO. 623-2040

(This space for State Use)

APPROVED BY SUPERVISOR, DISTRICT II TITLE _____ DATE FEB 25 1994

CONDITIONS OF APPROVAL, IF ANY: