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DISTRIBUTION								30-005-60415	
SANTA FE	/			CTATION COM	M13310P	-	Form C-101 Revised 1-1-6	5	
FILE		E C E	IVED			ſ		Type of Lease	
U.S.G.S.	2						STATE		
LAND OFFICE	/					E. E		& Gas Lease No.	
OPERATOR		MAR 1 6	1977				K -68		
						t t	mm	mmmmi T	
APPLICATI	ON FOR PE	RMT FO	RILL, DEEPEN, O	OR PLUG BA	CK		///////		
la. Type of Work		(15,51A) 	HIP ISE				7. Unit Agre	ement Name	
DRILL	۲)	•	DEEPEN			[
b. Type of Well					PLUGE		8. Farm or L	ease Name	
OIL GAS WELL	.] о/н	R	•	SINGLE X	MUL	ZONE	Lula	1	
2. Name of Operator	·····		· · · · · · · · · · · · · · · · · · ·				9. Well No.	- 	
Holly Energy.	Inc. V						#2		
Holly Energy, Inc. V 3. Address of Operator							10. Field and Pool, or Wildcat		
P. O. Box 726, Artesia, New Mexico 88210						ļ	Buffalo Valley Prov.		
4. Location of Well UNIT LET	TER D	LO	CATED 990 FE	LET FROM THE	Nor		ШШ	inninnin (
						h			
AND 990 FEET FROM	Wes		TV OF SEC.	" _{P.} 15–5	<u>ود.</u> 28	NMPM			
	////////				/////		12. County		
+++++++++++++++++++++++++++++++++++++++	<i>HHHH</i>	HHH.		MMM	7777		Chave	<u>s (</u>	
		HHH.		HHHHH		///////	HHHH		
<i>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</i>	<i>HHHH</i>	<i>HHH</i>		<u>TITTTT</u>	71111	IIIII	<u>IIIII</u>		
		//////). Proposed Dept	th 11	9A. Formation		20. Rotary or C.T.	
21. Elevations (Show whether D.	F RT etc.)	216 Kind		8500		Atoka		Rotary	
3690.7 GL			& Status Plug. Bond 21B. Drilling Contractor				. Date Work will start		
		State	Wide Bond	Ard #4			As Soon	As Possible	
		F	ROPOSED CASING AND	CEMENT PROG	RAM				
SIZE OF HOLE	SIZE OF	CASING	WEIGHT PER FOOT	SETTING D					
17 1/2	13 3/8		48#	350		SACKS OF		EST. TOP Circ.	
12 1 4	8 5/8		24#	1650		350 800		Circ.	
7 7/8	$\frac{0}{4} \frac{1}{2}$		11.6#	8500		330			
1 17 -	-/-						,°		
•,									
Blow	Out Preve	ntors;	Double Hydrau	lic, 900 S	eries	•			
Hydrill:			900 Series.						
Rotating Head			YOU DELTED.						
Rotat	ing Head								
							AP#RC	OVAL VALID	

FOR 90 DAYS UNLESS DRILLING COMMENCED,

Approximately 4 miles to the nearest dwelling

6-17-77 EXPIRES ...

Gas Not dedicated

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUC-TIVE 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 Loyal_ Title	Superintendent	Date March 15, 1977							
(This space for State Use)									
APPROVED BY M. a. Spesset TITLE_	SUPERVISOR, DISTRICT. H	MAR 1 7 1977							
CONDITIONS OF APPROVAL, IF ANY:	•								