NO. OF COPIES RECEIV	ED 5								
DISTRIBUTION			NEW MEXICO OIL CONS	Form C-	Form C-101				
SANTA FE	1					Revised	1 1-1-65		
FILE	/-						licate Type of Lease		
U.S.G.S.	2				<i>,</i>				
LAND OFFICE						-5. State	e Oil & Gas Lease No.		
OPERATOR	1								
						_////			
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK									
la. Type of Work						7. Unit	Agreement Name		
DF					PLUG BACK]			
b. Type of Well	_				_	- 8. Form	n or Lease Name		
	GAS WELL	OTHER		SINGLE ZONE	MULTIPLE ZONE		anning "A"		
2. Name of Operator						9. Well	No.		
Kewanee Oil Company							2		
3. Address of Operator			-				eld and Pool, or Wildcat		
P.O. Box 3786, Odessa, Texas						Atok	a San Andres		
4. Location of Well	UNIT LETTER	J	LOCATED2310	FEET FROM THE	South	ne A///			
AND 2310 F	EET FROM T	E East	LINE OF SEC. 13	тwр. 185	RGE. 26E NM				
						12. Co			
						<u> </u>	<u>ddy ()///////</u>		
						//////			
ΛΙΙΙΙΙΙΙΙΙΙΙ	///////					//////			
	IIIII			19. Proposed D	epth 19A. Form	ntion	20, Rotary or C.T.		
				20001	San A		Rotary		
21. Elevations (Show w	hether DF, R	T, etc.) 21	A. Kind & Status Plug. Bond				22. Approx. Date Work will start		
3295' Gro	und	I	Blanket Bond	Unknown			9-27-65		
23. PROPOSED CASING AND CEMENT PROGRAM									

4

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
1111	8-5/8"	24	11001	350	Surface
7-7/8"	5-1/2"	14	20001	250	1000*
				1	

Propose to drill 11" hole to 1100' and set 8-5/8" O. D. 24#/ft. casing at 1100' and cement to surface with 350 sacks cement. Will drill 7-7/8" hole to total depth of 2000' and set $5-1/2^{m}$ O. D. 14#/ft. casing at 2000' and cement up to 1000' with 250 sacks cement which will be 100' into 8-5/8" O. D. surface casing. Will complete in the San Andres formation by perforating $5-1/2^{m}$ casing and fracture treating with approximately 50,000 gallons of fresh water and 50,000 pounds of sand at 50 BPM. Will run rods and tubing and place on pump.

		FOR 90 DAYS UNLESS	RE	CEI	VED
		PRILLING COMMENCED	ę	SEP 7	1965
IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF TIVE ZONE, GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.		S TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESEN	T PRODUCTA	(). () .	
I hereby certify that the information above is true and con Signed 6 / Struckloud	nplete to the	best of my knowledge and belief. Division Superintendent	Date	9-2-65	
(This space for State Use) APPROVED BY ML armitrong		on. And sa g inspected	DATE	SEP 7	1965
CONDITIONS OF APPROVAL, IF ANY:					•

It will be necessary for us to witness the cementing of the pipe, as it is in the water area.