

CISR  
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State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-101  
Revised 1-1-89

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

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

SEP 13 1993

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)  
30-015-27091

5. Indicate Type of Lease  
STATE  FEE

6. State Oil & Gas Lease No.  
E-7811

**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  
Cedar Breaks "2" State

2. Name of Operator  
Mewbourne Oil Company

8. Well No.  
1

3. Address of Operator  
P.O. Box 5270 Hobbs, New Mexico 88241

9. Pool name or Wildcat  
Walters Lake Bone Springs

4. Well Location  
Unit Letter G : 2130 Feet From The North Line and 1980 Feet From The East Line  
Section 2 Township 18S Range 30E NMPM Eddy County

10. Proposed Depth: 3590'  
11. Formation: San Andres/Grayburg  
12. Rotary or C.T.: Workover

13. Elevations (Show whether DF, RT, GR, etc.): 3629' GL  
14. Kind & Status Plug. Bond: Blanket on file  
15. Drilling Contractor: ---  
16. Approx. Date Work will start: [Upon Approval]

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP

- Set CIBP @  $\pm$  6850' to temporarily abandon Bone Springs (6918'-7062'). Bone Springs has been squeezed and tested to 2000#. Will plug back remainder of hole when well is plugged and abandoned.
- Perforate San Andres Dolomite from 3550'-3586'. Stimulate and test.
- Set retrievable bridge plug at  $\pm$  3530'.
- Perforate Grayburg from 3348'-3514'. Stimulate and test.
- Rull retrievable bridge plug.
- Run production string and produce well.

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 Erick W. Nelson TITLE Engineer DATE 09/03/93  
TYPE OR PRINT NAME Erick W. Nelson TELEPHONE NO. \_\_\_\_\_

(This space for State Use) ORIGINAL SIGNED BY  
MIKE WILLIAMS  
SUPERVISOR, DISTRICT II TITLE \_\_\_\_\_ DATE SEP 29 1993

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

