

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

Form C-101
Revised 10-1-78

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RECEIVED BY O. BOX 2088
SANTA FE, NEW MEXICO 87501
APR 25 1985
O. C. D.
ARTESIA OFFICE

5A. Indicate Type of Lease
STATE ☒ FEE ☐
5. State Oil & Gas Lease No.
L-1649 and K-3403

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work b. Type of Well DRILL <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator Exxon Corporation 145-686-4406		8. Farm or Lease Name South Carlsbad Gas Com #2
3. Address of Operator P. O. Box 1600, Midland, Texas 79702		9. Well No. 1
4. Location of Well UNIT LETTER J LOCATED 1650 FEET FROM THE South LINE AND 1980 FEET FROM THE East LINE OF SEC. 27 TWP. 23S RGE. 26E NMPM		10. Field and Pool, or Wildcat Wildcat (Atoka)
11. Elevations (Show whether DT, RT, etc.) 3289 RT		12. County Eddy
21A. Kind & Status Plug. Bond Blanket	19. Proposed Depth 11265 PBDT	19A. Formation Atoka
21B. Drilling Contractor Unknown	20. Rotary or C.T. Rotary	
22. Approx. Date Work will start Upon Approval		

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
15"	11 3/4"	42, 54	632	940	Surface
10 5/8"	8 5/8"	32	5273	925	Surface
7 7/8"	5 1/2"	17, 20, 23	11867	1475	8180

Set CIPB at 11300', cap w/35' cmt. to plug off Morrow formation at 11381-11753.
Sqz Strawn perms at 10,304 - 10,382 w/150 sx ClH. Perf. Atoka at 10517 - 10,994'
W/183 shots. Acdz. Test.

Gas is dedicated to a purchaser.

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 10-26-85
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 Melba Knippling Title Unit Head Date 4-24-85

(This space for State Use)

Original Signed By
Mike Williams
Oil & Gas Inspector

APPROVED BY _____ DATE APR 26 1985
CONDITIONS OF APPROVAL, IF ANY: