	,					- 1 - 5 - 7	
NO. OF COPIES RECEIVED		NEW MEXICO OIL CONSERVATION COMMISSION				3c -6/9-2/396 Form C-101	
DISTRIBUTION	+					Form C-191 Revised 1-1-65	
SANTA FE	-	RECEIVED			5A, Indicate Type of Lease		
U.S.G.S.			.1	1	STATE	FEE X	
LAND OFFICE	1	OCT 1 5 19	974	.5. 5	nD & liO etat	s Lease No.	
OPERATOR ,			214	-	,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
APPLICATION FOR PERMIT TO DRILL DEEP OF PLUG BACK						7. Unit Agreement Name	
la. Type of Work					- · · · · · · · · · · · · · · · · · · ·		
DRILL X DEEPEN PLUG BACK D. Type of Well						8. Furm or Lease Name	
OIL GAS X SINGLE MULTIPLE ZONE ZONE						Henri Grandi	
2. Name of Operator	OFFICA			1			
Apexco, Inc.				1			
3. Address of Operator  1121 First Place, Tulsa, Oklahoma 74103  4. Location of Well Unit Letter K Located 1980 FEET FROM THE West Line						10. Field and Pool, or Wildoat - Wildoat	
1121 First Place,	Tulsa, Oklahon	na 74103		1	TITTE	mmm	
4. Location of Well UNIT LETTE	R K	1980 FE	ET FROM THE Wes	tLINE			
	a 11	9.2	P. 22S RGE. 27E	1/1			
AND 1880 FEET FROM	THE DOUGH LINE	E OF SEC.	millimi	12.	, County	HHHHH	
				E	ddy		
	<i>HHHHH</i>						
					7//////		
		1		9A. Formation  Morrow	- 1	Rotary or C.T. Rotary	
		& Status Plug. Bond 21	12,400			te Work will start -	
21. Elevations (Show whether DF,		wide Active	Marcum		10-12-		
3084.7 GL							
	Р	ROPOSED CASING AND	CEMENT PROGRAM		<del> </del>		
SIZE OF HOLE	SIZE OF CASING	TOXING MEIGHT EXTRO		SACKS OF CI		EST. TOP	
15 "	12 3/4"	40#	400 4600	To circ		urface 200	
11 1/2"	9 5/8"	36# & 40# 11.6# & 15.1#	12400	400		800	
8 3/4"	4 1/2"	11.0# & 10.1#	12400			000	
						,	
Operator will ins	stall double-ra	m blowout preve	ntors rated at	3000# WP c	and 6000#	test to	
assure proper we	ll control at a	ll times.					
						-	
109						AL VALID	
					FOR 90 DAYS UNLESS		
NSL. 689						COMMENCED,	
<i>I</i> *					IRES	6-7 <b>5</b>	
				EXP	IRES		
IN ABOVE SPACE DESCRIBE PR	OPOSED PROGRAM: IF	PROPOSAL IS TO DEEPEN OF	R PLUG BACK, GIVE DATA O	N PRESENT PRODUC	CTIVE ZONE AND	PROPOSED NEW PRODUC	
TIVE ZONE. GIVE BLOWOUT PREVENT	ER PROGRAM, IF ANY.						
I hereby certify that the information	( )						
Signed Double	Simell	TulCentral Div	ision Productio	on Mgr. Dat	e10-	-10-74	
(This space for					-		
110	B 1-	OIL AND (	RAS INSPECTOR		OCT 1	16 1074	
APPROVED BY	Fresset	<del></del>		DA	TE OUT	13/4	
CONDITIONS OF APPROVAL, IF  G The must be  + l'infect leg 1	ANY: T. C. La	KE Besed Sal	*	ment must b	e circulate	d to	
4 / must hi	To a service	, , , , , , , , , , , , , , , , , , , ,	Cer	mem musi m	123/4"	easing	
+ borfeet light	ing, milling		surfa	ce behind	P. 11	_ t.asire#	