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DISTRIBUTION	NE.	NEW MEXICO OIL CONSERVATION COMMISSION					
SANTA FE /						-65	
U.S.G.S.	, -					le Type of Leane	
LAND OFFICE	4	AUG 27 1980			STATE		
OPERATOR /						l & Gas Lease No.	
			O. C. D.		mm	mmmmmm.	
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK							
la. Type of Work		DIGEL, DEET EN,	OK I LOO BACK		7. Unit Aur	eement Name	
DRILL X		DEEPEN	Divio				
b. Type of Well		, , , , , , , , , , , , , , , , , , ,		BACK [_]	8. Farm or J	Lease Name	
ofL GAS WELL X	OTHER		SINGLE X MUT	ZONE	Brant	eley A Com.	
Cities Service Company						9. Well No.	
3. Address of Operator	Company				1.		
•						10. Field and Pool, or Wildeat	
P.O. Box 1919 - Midland, Texas 79702 4. Location of Well UNIT LETTER J LOCATED 1980 FEET FROM THE SOUTH LINE					Und. N. Loving Mor		
UNIT LETTE	LO LO	CATED 1900 F	FEET FROM THE SOUT	LINE			
AND 1980 FEET FROM	THE East LI	NE OF SEC. 7	we. 23S RGE. 2	8E NMPM			
				777777	12. County	million of	
					Eddy		
				77777	inni		
				9A. Formation		20. Hotery or C.T.	
21. Elevations (show whether I) F,		& Status Plug. Bond 2	12650'	Morr	.OM	Rotary	
3038.9'	· ·	red/Approved	Not Release	ر ا		Date Work will start	
23.	109411	ca, ripproved	HOC RETEUBL	.u	1 000	ober 1, 1980	
	F	PROPOSED CASING AND	CEMENT PROGRAM				
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF	CEMENT	EST. TOP	
17-1/2"	13-3/8"	48#	400'	900		Circulated	
12-1/4"	9-5/8"	36 & 40#	2500'	1500		Circulated	
8-3/4"	7"	23,26 & 29#	11000'	500		TC @ 9000'	
6-1/2"	5"	18#	10700-12650'	150		Circulated	
					<u> </u>		
It is prop	osed to dril	l this well	to a total de	pth of	12,650	' to test	
the Morrow	Formation.	The blowout	prevention p	rogram	is as	follows:	
	1. one set	of blind ra	m a				
		of drill pi					
	3. one Hyd	ril.	pe rams.				
	4. one rot						
		_					
The acreag	e assigned t	o this well :	is not dedica	ted to	APPROVA	s purchaser.	
				FO	R 90 DAYS	SUNIFCE	
				DRIL	LING COA	MMENCED.	
				_	12 -	,	
N ABOVE SPACE DESCRIBE PRO IVE ZONE, GIVE BLOWOUT PREVENTO	POSED PROGRAM: IF I	PROPOSAL IS TO DEEPEN OR	PLUG BACK, GIVE DATA ON	PRESENTEROD	OCTIVE ZONE	-8 0	
hereby certify that the information		lete to the best of my kn	owledge and hellef			-	
≥ 11.	10					_	
igned	uan	Title Region Op	perations Man	ager _n	", Aug	ust 26, 1980	

SUPERVISOR, DISTRICT II

SEP 2 - 1980

CONDITIONS OF APPROVAL, IF ANY: