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NEW MEXICO OIL CONSERVATION COMMISSION

MAP 02 1981

C. C. O.

APPROVAL

30-015-23687

Form C-101
Revised 1-1-65

5A. Indicate Type of Lease STATE ☒ FEE ☐
5. State Oil & Gas Lease No. L-5386
7. Unit Agreement Name
8. Farm or Lease Name STATE DR
9. Well No. 1
10. Field and Pool, or Wildcat Undr. Delaware Sand
12. County Eddy
13. Proposed Depth 2600'
19A. Formation Delaware Sd
20. Rotary or C.T. Cable Tools
21. Elevations (Show whether DF, RL, etc.) 3066.6' GR
21A. Kind & Status Plug. Bond Required/Approved
21B. Drilling Contractor Not Released
22. Approx. Date Work will start March 10, 1981

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work b. Type of Well OIL WELL ☒ GAS WELL ☐ OTHER ☐ 2. Name of Operator Cities Service Company 3. Address of Operator Box 1919, Midland, TX 79702 4. Location of Well UNIT LETTER I LOCATED 1980 FEET FROM THE South LINE AND 660 FEET FROM THE East LINE OF SEC. 36 TWP. 22S RGE. 27E NMPM	5. State Oil & Gas Lease No. L-5386 7. Unit Agreement Name 8. Farm or Lease Name STATE DR 9. Well No. 1 10. Field and Pool, or Wildcat Undr. Delaware Sand 12. County Eddy 13. Proposed Depth 2600' 19A. Formation Delaware Sd 20. Rotary or C.T. Cable Tools 21. Elevations (Show whether DF, RL, etc.) 3066.6' GR 21A. Kind & Status Plug. Bond Required/Approved 21B. Drilling Contractor Not Released 22. Approx. Date Work will start March 10, 1981
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23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/2"	8-5/8"	24#	350'	250 Sacks	Circulate
7-7/8"	5 1/2"	14#	2600	350 Sacks	Circulate

It is proposed to drill this well to a T.D. of 2600' to test the Delaware Sand formation.

The acreage assigned to this well is not dedicated to any gas purchaser.

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 9-6-81
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 [Signature] Title Region Operations Manager Date 2/27/81

(This space for State Use)

APPROVED BY [Signature] TITLE SUPERVISOR, DISTRICT II DATE MAR 06 1981

CONDITIONS OF APPROVAL, IF ANY: