

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

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

OIL CONSERVATION DIVISION

P.O. Box 2088 RECEIVED
Santa Fe, New Mexico 87504-2088

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

DEC 4 '90

API NO. (assigned by OCD on New Wells)

30-015-26564

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

L-5364

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL ☒

RE-ENTER ☐

DEEPEN ☐

ARTESIA, OFFICE
PLUG BACK ☐

b. Type of Well:

OIL
WELL ☐

GAS
WELL ☒

OTHER ☐

SINGLE
ZONE ☒

MULTIPLE
ZONE ☐

7. Lease Name or Unit Agreement Name

Malaga 36 State

2. Name of Operator

Enron Oil & Gas Company

8. Well No.

1

3. Address of Operator

P. O. Box 2267, Midland, Texas 79702

9. Pool name or Wildcat

Culebra Bluff, So. (Atoka)

4. Well Location

Unit Letter

I

: 1980

Feet From The

south

Line and

990

Feet From The

east

Line

Section

36

Township

23S

Range

28E

NMPM

Eddy

County

10. Proposed Depth

12,100'

11. Formation

Atoka

12. Rotary or C.T.

Rotary

13. Elevations (Show whether DF, RT, GR, etc.)

2963.2

14. Kind & Status Plug. Bond

Blanket-Active

15. Drilling Contractor

Unknown

16. Approx. Date Work will start

When Permitted

17.

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	600	650	Circulated
12-1/4	9-5/8	36	2,500	1200	Circulated
8-3/4	7	26	10,500	650	7,000'
6-1/8	4-1/2 Liner	13.5 or 15.1	12,100	300	10,200'

BOP - Install at 2500' with 3000# cap & 2450# annular preventor. At 10,500' increase to 10,000# cap with 5000# annular preventor. Will use standard surface controlled BOP installation.

Gas is not dedicated.

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 6/6/91
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.

SIGNATURE

Betty Gildon

TITLE

Regulatory Analyst

DATE 12/3/90

TYPE OR PRINT NAME

Betty Gildon

(915) 686-3714
TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS

APPROVED BY

SUPERVISOR, DISTRICT II

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

DEC 6 1990