

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

file

OIL CONSERVATION DIVISION

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

P.O. Box 2088  
Santa Fe, New Mexico 87508

JUL 17 1991

API NO. (assigned by OCD on New Wells)  
30-015-26796

5. Indicate Type of Lease  
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK  
ARTESIA, OFFICE

1a. Type of Work:  
DRILL ☒ RE-ENTER ☐ DEEPEN ☐ PLUG BACK ☐

b. Type of Well:  
OIL WELL ☐ GAS WELL ☒ OTHER ☐ SINGLE ZONE ☐ MULTIPLE ZONE ☐

2. Name of Operator  
Nearburg Producing Company

3. Address of Operator  
P. O. Box 823085, Dallas, Texas 75382-3085

4. Well Location  
Unit Letter E : 660 Feet From The West Line and 2500 Feet From The North Line  
Section 15 Township 22S Range 27E NMPM Eddy County

7. Lease Name or Unit Agreement Name  
SUENO 15

8. Well No.  
1

9. Pool name or Wildcat  
☒ Undesignated Atoka-Morrow

10. Proposed Depth  
12,000

11. Formation  
Morrow

12. Rotary or C.T.  
Rotary

13. Elevations (Show whether DF, RT, GR, etc.)  
3097.2 GR

14. Kind & Status Plug. Bond  
Blanket

15. Drilling Contractor  
Peterson Drlg

16. Approx. Date Work will start  
7-31-91

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	13-3/4	48#	400	875	Circulate
12-1/4	8-5/8	24 & 32#	5,500		
7-7/8	5-1/2	17 & 20#	12,000		

Propose to drill the well to sufficient depth to evaluate the Morrow Formation.  
After reaching T.D. logs will be run and casing set if evaluation is positive.  
Perforate, test and stimulate as necessary to establish production.

Post ID-1  
7-26-91  
New Loc & API

APPROVAL VALID FOR 180 DAYS  
PERMIT EXPIRES 1/24/92  
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 Eddie J. Gelwick TITLE Operations Coordinator DATE 7/15/91

TYPE OR PRINT NAME Eddie J. Gelwick TELEPHONE NO.

(This space for State Use) ORIGINAL SIGNED BY  
MIKE WILLIAMS  
SUPERVISOR, DISTRICT II TITLE DATE JUL 24 1991

CONDITIONS OF APPROVAL, IF ANY:

NSL-R-9543  
6-18-91