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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

5A. Indicate Type of Lease
STATE FEE

5. State Oil & Gas Lease No.
E-1311

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input checked="" type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name New Mexico B	
2. Name of Operator Mobil Oil Corporation		9. Well No. 4	
3. Address of Operator P. O. Box 633, Midland, Texas 79701		10. Field and Pool, or Wildcat Mescalero Perm Penn.	
4. Location of Well UNIT LETTER <u>G</u> LOCATED <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>1095</u> FEET FROM THE <u>East</u> LINE OF SEC. <u>27</u> T10S R32E N44PM		12. County Lea	
18. Proposed Depth 9265		19A. Formation Pennsylvanian	20. Rotary or C.T. Rotary
21. Elevations (Show depth or DT, WT, etc.) 4329' - Ground	21A. Kind & Status Plug, Bond On File	21B. Drilling Contractor	22. Approx. Date Work will start As soon as possible

23. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP

This well was originally drilled to a depth of 9682 ft and completed in the Devonian. Permission is requested to plug and abandon the Devonian, plug back and complete in the Pennsylvanian formation.

Blowout Preventer Program:

Casing String	Equip. Size	x API Series	No. and Type	Test Press. PSI
7-5/8"	8"	600	1-Blind Pipe Ram	

APPROVAL VALID 2000
90 DAYS UNLESS
DRILLING COMMENCED,
EXPIRES 4-13-75

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, SET & BLOWOUT PREVENTER PROGRAM, IF ANY.

I hereby certify that the information above is true and correct to the best of my knowledge and belief.

Signed A. D. Bond A. D. Bond Title Proration Staff Assistant Date January 9, 1975

APPROVED BY [Signature] TITLE [Signature] DATE _____
CONDITIONS OF APPROVAL, IF ANY: