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LAND OFFICE	
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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101  
Revised 1-1-65

5A. Indicate Type of Lease	
STATE <input checked="" type="checkbox"/>	FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	
00 11-12	
7. Unit Agreement Name	
8. Farm or Lease Name	
Shell-Springs	
9. Well No.	
1	
10. Field and Pool, or Wildcat	
South 100	
12. County	
Lea	
19. Proposed Depth	19A. Formation
10000	Permian (G)
20. Rotary or C.T.	
21. Elevations (Show whether DF, RT, etc.)	21A. Kind & Status Plug. Bond
	Blanket
21B. Drilling Contractor	22. Approx. Date Work will start
McGuff Drilling Co., Inc.	11/18/67

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK	
1a. Type of Work	
b. Type of Well DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input 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"/>	
2. Name of Operator	
Horton, Gabel & Forester	
3. Address of Operator	
1805 Vaughn Bldg. (Box 953) Midland, Texas	
4. Location of Well	
UNIT LETTER	LOCATED
B	660
FEET FROM THE	
North LINE	
AND	FEET FROM THE
1000	East
LINE OF SEC.	
1	
TWP.	RGE.
10S	30E
NMPM	
12. County	
Lea	
19. Proposed Depth	
10000	
19A. Formation	
Permian (G)	
20. Rotary or C.T.	
21. Elevations (Show whether DF, RT, etc.)	
21A. Kind & Status Plug. Bond	
Blanket	
21B. Drilling Contractor	
McGuff Drilling Co., Inc.	
22. Approx. Date Work will start	
11/18/67	

## PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
3 1/2	21 3/8	10.0	800	250	Surface
2 1/2	8 3/4	24.4 - 22	9000	450	1987
7 7/8	8 1/2	15.5 - 17	10000	550	7600

THE COMMISSION MUST BE PROVIDED  
24 HOURS PRIOR TO RUNNING  
CASING.

APPROVAL VALID  
FOR 90 DAYS UNLESS  
DRILLING COMMENCED

PRES

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 Edward Smith Title Agent Date 11/15/67

(This space for State Use)

APPROVED BY [Signature] DATE NOV 17 1967

CONDITIONS OF APPROVAL, IF ANY:

ORIGINAL & THREE COPIES  
SIGNED & SEALED & ENCLOSED  
ENCLOSURE No. 1