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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"/>
5. State Oil & Gas Lease No.	
K-6802	

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
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"/>		8. Farm or Lease Name State "L"	
2. Name of Operator MONSANTO COMPANY		9. Well No. 1	
3. Address of Operator 101 North Marienfeld, Midland, Texas 79701		10. Field and Pool, or Wildcat Vada (Penn.)	
4. Location of Well UNIT LETTER P LOCATED 660 FEET FROM THE South LINE AND 660 FEET FROM THE East LINE OF SEC. 19 TWP. 10S RGE. 34E NMPM		12. County Lea	
19. Proposed Depth 10,200'		19A. Formation Bough "C"	
20. Rotary or C.T. Rotary		21. Elevations (Show whether DE, RT, etc.) furnish later	
21A. Kind & Status Plug. Bond blanket		21B. Drilling Contractor not awarded	
22. Approx. Date Work will start upon approval			

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
15"	11-3/4"	42#	350'	350	Circ. to surface
10-5/8"	8-5/8"	24#	4,000'	500	2000'
7-7/8"	5-1/2"	15.5# & 17#	10,200'	200	9200'

Drill 15" hole to 350' and set and cement 11-3/4" casing to surface. Drill 10-5/8" hole to 4000', set 8-5/8" casing and cement w/500 sx. Drill 7-7/8" hole to 10,200', set and cement 5-1/2" casing w/200 sx. Hole will be drilled w/fluid system. Perforate and treat any zones which indicate they would be commercially productive of oil or gas. Drill stem test all shows of oil or gas. BOP: Ser 1500 hydril & Ser 1500 dbl. hyd.

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 W. W. Wood Title Dist. Prod. Supt. Date Sept. 12, 1968

(This space for State Use)

APPROVED BY [Signature] TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: