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NEW MEXICO OIL CONSERVATION COMMISSION					→ Form C-101	
SANTA FE					Revised 1-1-	65 .
FILE						Type of Lease
U.S.G.S.					STATE	
OPERATOR						& Gas Lease No. K-5353
					THE STATE OF THE S	innimini
	ON FOR PERA	MIT TO DRILL, DEEP	EN, OR PLUG BACK			
la. Type of Work	w.				7. Unit Agre	eement Name
b. Type of Well DRILL	4	DEEPEN	PLU	JG BACK	8. Form or I	ease Name
OIL X GAS WELL	OTHER	SINGLE X MULTIPLE ZONE			State "D"	
2. Name of Operator		C COPPORATION	ZONE [_]	ZONE	9. Well No.	
	ERN MINERAL	LS CORPORATION				3
	BOX 716 CO	ORPUS CHRISTI, TEX	AS 78403		10. Field on Imbe	nd Pool, or Wildcat Penn
4. Location of Well	ЕнВ	LOCATED 510	FEET FROM THE NOT	th LINE		
1986 2 150	East	8	11 0			
AND FEET FROM	THE LAST	LINE OF SEC.	TWP. 11-S	34-E NMPM	12. County	niitiitiiti
					Lea	
	HHHH			HHHH	Titill	HHHHPirin
			i9. Proposed Depth	19A. Formation		20. Rotary or C.T.
21. Elevations (Show whether DF			10,000	Bough		Rotary
21. Elevations (Show whether Dr	, K 1, etc.)	IA. Kind & Status Plug. Bo Blanket	1 *			. Date Work will start
23.		DIMIKEL	Cactus Drlg	.corp.	1 Un A	pproval
		PROPOSED CASINO	AND CEMENT PROGRAM			
SIZE OF HOLE	SIZE OF CA		OOT SETTING DEPT	OT SETTING DEPTH SACKS O		EST. TOP
17"	13-3/8		400	375		Surface
11"	8-5/8		4050	450		2000
7-7/8	5-1/2	17	10000	500	1	73000
running sur "C" formati is indicate	face and i on which i d after re	ntermediate casi s producing in t aching total dep	l to an approximang as described. The SOMICO Nos.1 the production castated and treated	The objecti { 2 wells.] sing will h	lve is t If produ De run a	he Bough ction
expires	3-/7-	69	Klastikas j			133
N ABOVE SPACE DESCRIBE PR IVE ZONE. GIVE BLOWOUT PREVENT	IOPOSED PROGR ER PROGRAM, IF A	RAM: IF PROPOSAL IS TO DEE!	PEN OR PLUG BACK, GIVE DATA	ON PRESENT PROD	DUCTIVE ZONE	AND PROPOSED NEW PRODU
hereby certify that the information	on above is true a	and complete to the best of	my knowledge and belief.			
igned W. L. M.	Cay	Title Agent		D	ate 12-10	0-68
(This space for	State (se)					
01	D		-			<u> </u>
PPROVED BY	Kuny	an 1505		D	ATE	. :
ONDITIONS OF APPROVAL, IF	ANY:					