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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.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>		7. Unit Agreement Name
b. Type of Well 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 Santa Fe
2. Name of Operator Coastal States Gas Producing Company		9. Well No. 2
3. Address of Operator c/o Oil Reports & Gas Services, Box 763, Hobbs, New Mexico		10. Field and Pool, or Wildcat UNDESIGNATED
4. Location of Well UNIT LETTER G LOCATED 1980 FEET FROM THE North LINE AND 1980 FEET FROM THE East LINE OF SEC. 33 TWP. 9 S RGE. 37 E N.M.P.M.		12. County Lea
19. Proposed Depth 5200		19A. Formation San Andres
20. Rotary or C.T. Rotary		21. Approx. Date Work will start 2/10/69
21. Elevations (Show whether DF, RT, etc.)	21A. Kind & Status Plug. Bond Blanket	21B. Drilling Contractor Not Let

23. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/4	8 5/8	24#	400	400	Circ.
7 7/8	4 1/2	10.5#	5200	250	

8 5/8

APPROVAL FOR 90 DAYS
EXPIRES 5-10-69

5-10-69

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 Donna Galles Title Agent Date 2/7/69

(This space for Staff Use)
[Signature]

APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT 1 DATE 0 5 69

CONDITIONS OF APPROVAL, IF ANY:

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102
Supersedes C-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

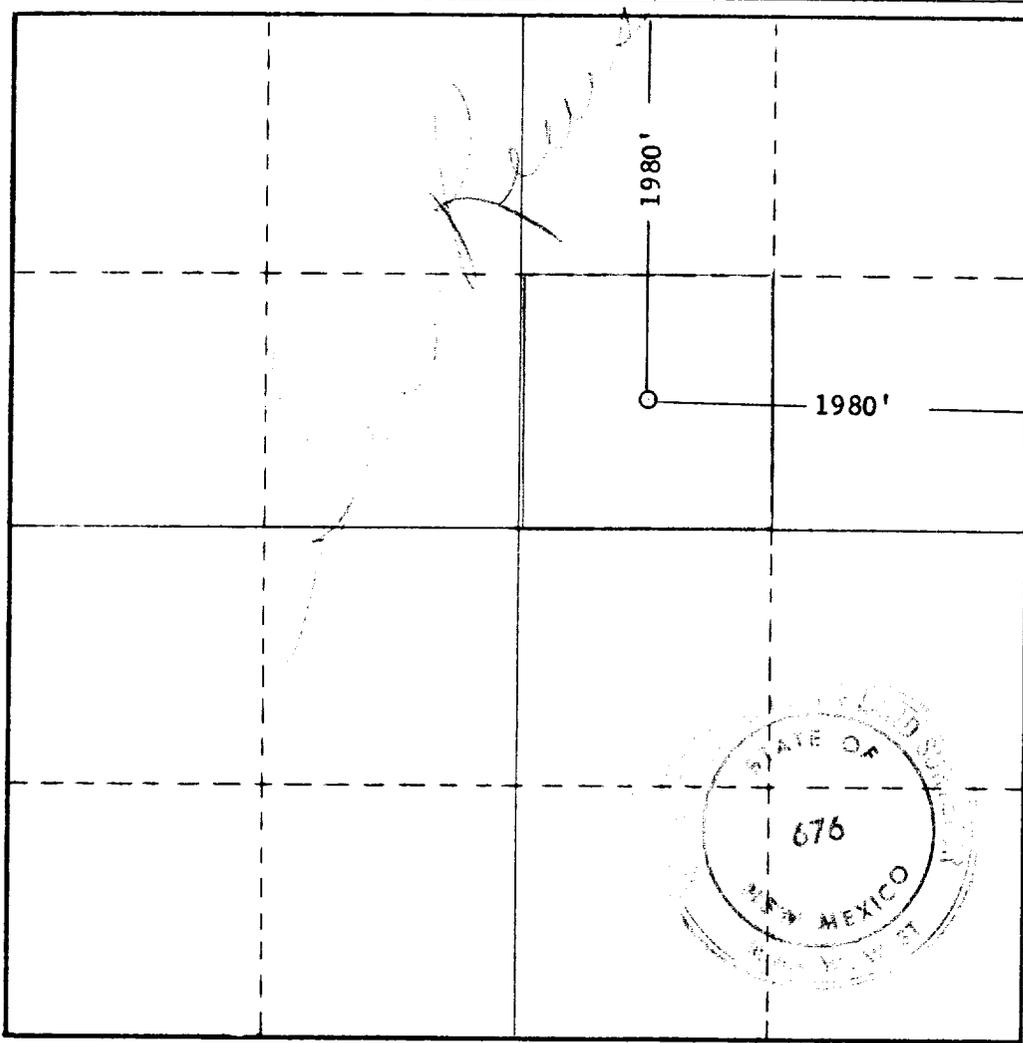
Operator COASTAL STATES GAS PRODUCING CO.		Lease SANTA FE		Well No. 2
Tract Letter G	Section 33	Township 9 SOUTH	Range 37 EAST	County LEA
Actual Footage Location of Well: 1980 feet from the NORTH line and 1980 feet from the EAST line				
Ground Level Elev.	Producing Formation San Andres	Pool INDESIGNATED	Dedicated Acreage: 40 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

Yes No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name
Wonna Hollis

Position
Agent

Company
Coastal States Gas Prod. Co.

Date
2/7/69

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed
2-7-1969

Registered Professional Engineer and/or Land Surveyor
John W. West

Certificate No.
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