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OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION  
HOBBS OFFICE O. C. C.

APR 21 9 36 AM '69

Form C-101  
Revised 1-1-65

5A. Indicate Type of Lease	
STATE <input type="checkbox"/>	FEE <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
8. Farm or Lease Name <b>Granny</b>	
9. Well No. <b>1</b>	
10. Field and Pool, or Wildcat <b>Undesignated</b>	
12. County <b>Lea</b>	
19. Proposed Depth <b>12,500'</b>	19A. Formation <b>Devonian</b>
20. Rotary or C.T. <b>RT</b>	
21. Elevations (Show whether DF, RT, etc.) <b>4013.8 Gr</b>	21A. Kind & Status Plug. Bond <b>State Wide</b>
21B. Drilling Contractor <b>Tri-Service</b>	
22. Approx. Date Work will start <b>April 15, 1969</b>	

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"/>
b. Type of Well	
OIL WELL <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator <b>TOM L. INGRAM</b>	
3. Address of Operator <b>P. O. Box 1757, Roswell, New Mexico</b>	
4. Location of Well	
UNIT LETTER <b>0</b>	LOCATED <b>660</b> FEET FROM THE <b>South</b> LINE
AND <b>1980</b> FEET FROM THE <b>East</b> LINE OF SEC. <b>1</b> TWP. <b>11S</b> RGE. <b>36E</b> NMPM	
21. Elevations (Show whether DF, RT, etc.) <b>4013.8 Gr</b>	
21A. Kind & Status Plug. Bond <b>State Wide</b>	
21B. Drilling Contractor <b>Tri-Service</b>	
22. Approx. Date Work will start <b>April 15, 1969</b>	

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17"	13-3/8	48#	350	350	Circ.
11"	8-5/8	24 & 32E	4300	500	2000
7-7/8"	5-1/2	17#	12,500	500	9000

Will drill to total depth testing prospective pays as encountered. If productive, casing will be cemented, perforated, stimulated and completed.

Blowout preventer will be used.

NOTE: Filed to correct the location from 1980 FWL to read 1980 FEL as was correctly shown on Form C-102.

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 Tom L. Ingram Title Operator Date April 18, 1969

(This space for State Use)

APPROVED BY [Signature] TITLE SUPERVISOR DATE APR 21 1969

CONDITIONS OF APPROVAL, IF ANY:

Job separation sheet