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NEW MEXICO OIL CONSERVATION COMMISSION
HUBBARD OPERATIONS DIVISION
O.C.C.

May 28 11 40 AM '69

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.	

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"/>				8. Farm or Lease Name State Sawyer	
2. Name of Operator Coastal States Gas Producing Company				9. Well No. 1	
3. Address of Operator P. O. Box 235, Midland, Texas 79701				10. Field and Pool, or Wildcat Undes. West Sawyer	
4. Location of Well UNIT LETTER B LOCATED 660 FEET FROM THE north LINE AND 1980 FEET FROM THE east LINE OF SEC. 4 TWP. 10S RGE. 37E NMPM				12. County Lea	
19. Proposed Depth 5200'		19A. Formation San Andres		20. Rotary or C.T. Rotary	
21. Elevations (Show whether DF, RT, etc.) 3966.7'		21A. Kind & Status Plug. Bond Blanket		22. Approx. Date Work will start 6-2-69	
21B. Drilling Contractor Verna Drlg. Co.					

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	9.5	5200	250	4100

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 Joe R. Howard Title Division Production Manager Date May 27, 1969

(This space for State Use)

APPROVED BY [Signature] TITLE [Signature] DATE May 27, 1969

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

OFFICE O. C. C.
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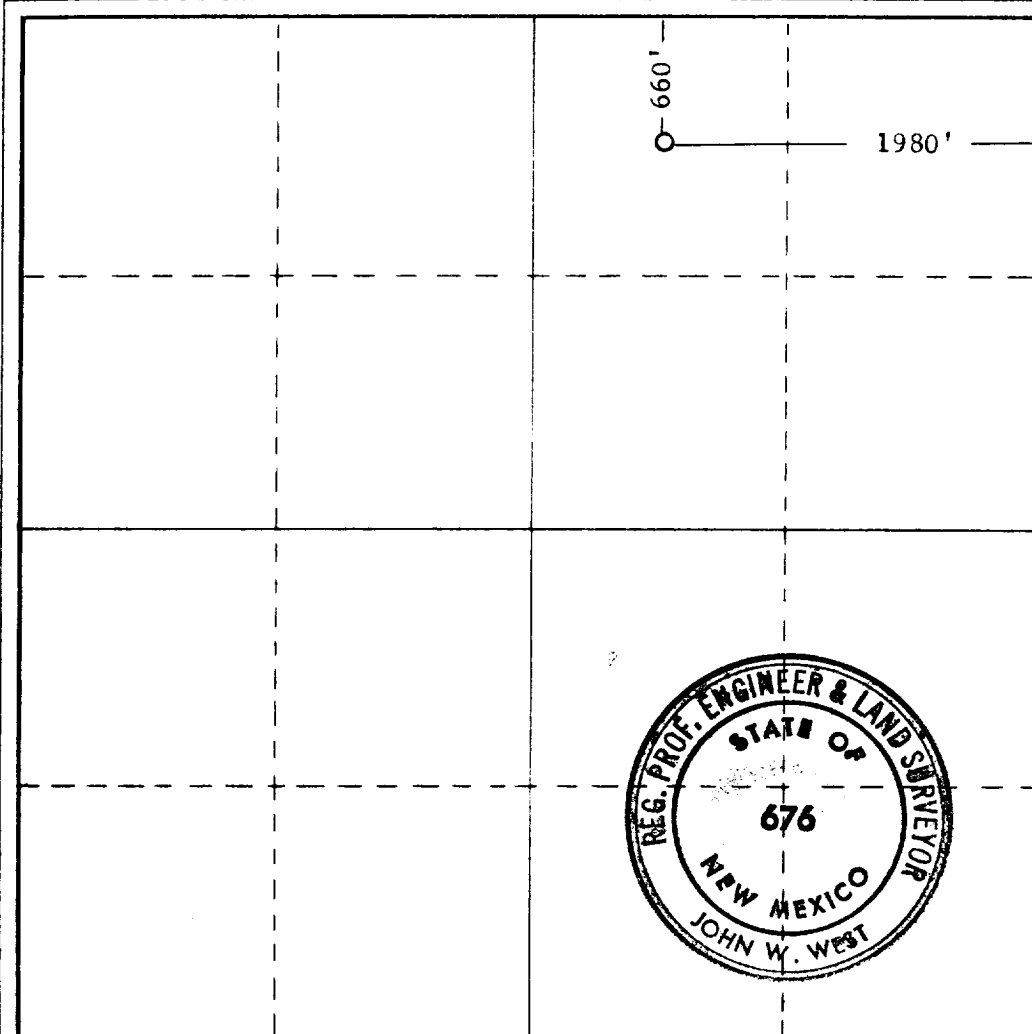
Operator COASTAL STATES GAS PRODUCING CO.		Lease STATE SAWYER		Well No. 1	
Unit Letter B	Section 4	Township 10 SOUTH	Range 37 EAST	County LEA	
Actual Footage Location of Well: 660 feet from the NORTH line and 1980 feet from the EAST line					
Ground Level Elev. 3966.7	Producing Formation San Andres		Pool Undes. West Sawyer		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 *Joe R. Howard*
Position **Division Production Manager**
Company **Coastal States Gas Producing Company**
Date **May 27, 1969**

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 **5-24-1969**
Registered Professional Engineer and/or Land Surveyor

John W. West
Certificate No. **676**

