

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101  
Revised 1-1-65

JUL 23 10 50 AM '69

AH 9 15

5A. Indicate Type of Lease
STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
5. State Oil & Gas Lease No.
OG 4541

## 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 type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name T. P. State 4	
2. Name of Operator SOUTHWESTERN NATURAL GAS, INC.		9. Well No. 1	
3. Address of Operator 900 Building of the Southwest, Midland, Texas 79701		10. Field and Pool, or Wildcat INBE (Penn.)	
4. Location of Well UNIT LETTER 0 LOCATED 660 FEET FROM THE South LINE AND 2100 FEET FROM THE East LINE OF SEC. 4 TWP. 11 RGE. 34 NMPM		12. County Lea	
19. Proposed Depth 10,100		19A. Formation Bough "C"	
20. Rotary or C.T. Rotary		21. Elevations (Show whether DF, RT, etc.) 4218 Est. G.L.	
21A. Kind & Status Plug. Bond Blanket		21B. Drilling Contractor Tom Brown Drlg. Co.	
22. Approx. Date Work will start. Immediately			

## PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17 1/2"	13 3/8"	48#	350'	350	Circ
11"	8 5/8"	24 & 32#	4150'	400	2500'
7 7/8"	4 1/2"	10.5 & 11.6#	10,100'	400	8600'

1. Drill 17 1/2" hole to 350' with spud mud and set 13 3/8" casing.
2. Drill 11" hole to 4150' with brine water and set 8 5/8" casing.
3. Drill 7 7/8" hole to 10,100' with salt water and salt gel mud and set 4 1/2" casing.

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 James E. Bennett Title Operations Manager Date 7-16-69

(This space for State Use)

APPROVED BY [Signature] TITLE SEAL OF THE COMMISSION DATE 7-16-69

CONDITIONS OF APPROVAL, IF ANY:

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

JUL 27 10 42 AM '69  
T. P. State

64 JUL 22 1964

- ☐ Yes ☐ No If answer is "yes," type of consolidation \_\_\_\_\_

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.

REGISTERED PROFESSIONAL ENGINEER  
STATE OF  
No.  
4590  
NEW MEXICO  
LARRY D. STEIN

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

Date  
July 18, 1969

*Long H. H. H.*  
Certificate No. 1590

