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

5A. Indicate Type of Lease
STATE ☒   FEE ☐

5. State Oil & Gas Lease No.
LG-1041

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work

DRILL ☒   DEEPEN ☐   PLUG BACK ☐

b. Type of Well
OIL WELL ☒   GAS WELL ☐   OTHER   SINGLE ZONE ☒   MULTIPLE ZONE ☐

7. Unit Agreement Name

8. Farm or Lease Name
Kellahin State

2. Name of Operator
Stallworth Oil & Gas

9. Well No.
1

3. Address of Operator
407 West Missouri Avenue, Midland, Texas 79701

10. Field and Pool, or Wildcat
Wildcat

4. Location of Well
UNIT LETTER **I** LOCATED **810** FEET FROM THE **East** LINE

AND **1980** FEET FROM THE **South** LINE OF SEC. **14** TWP. **9-S** RGE. **32-E** NMPM

12. County
Lea

19. Proposed Depth	19A. Formation	20. Rotary or C.T.
9600	**Strawn**	**Rotary**

21. Elevations (Show whether DF, RT, etc.)
4328 GL

21A. Kind & Status Plug. Bond
39-A1, $10,000

21B. Drilling Contractor
M-G-F Drilling Co.

22. Approx. Date Work will start
February 15, 1974

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17-1/2"	12-3/4"	34.3#	400'	400 sxs	Circ.
11"	8-5/8"	32 & 24#	4000'	400 sxs	2700'
7-7/8"	5-1/2"	15.5 & 17#	9600'	300 sxs	8200'

The well will be drilled with rotary tools using water to 7000' and mud to total depth.

A blowout preventer stack will be installed on the 8-5/8" intermediate casing prior to drilling out with a 7-7/8" bit at 4000'. The surface and intermediate casing strings will be pressure tested prior to drilling out. Anticipated depth of Strawn Formation 9575'. We will perforate casing and stimulate as necessary. No coring is anticipated. Open hole logs will be run and possible drill stem tests.

APPROVAL VALID
FOR 90 DAYS UNLESS
DRILLING COMMENCED,

EXPIRES _4-24-74_

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 _____ Title **Field Superintendent** Date **January 22, 1974**

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: