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# NEW MEXICO OIL CONSERVATION COMMISSION

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.	
<b>E-10130</b>	

## 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	
2. Name of Operator		9. Well No.	
Champlin Petroleum Company		Hondo-State	
Non-operator: Warren American Oil Company		2	
3. Address of Operator		10. Field and Pool, or Wildcat	
P. O. Box 1797, Midland, Texas		Undesignated	
4. Location of Well		12. County	
UNIT LETTER <b>G</b> LOCATED <b>1980</b> FEET FROM THE <b>North</b> LINE		Roosevelt	
AND <b>1980</b> FEET FROM THE <b>East</b> LINE OF SEC. <b>32</b> TWP. <b>7-S</b> RGE. <b>33-E</b> NMPM			
19. Proposed Depth		19A. Formation	20. Rotary or C.T.
4500'		San Andres	Rotary
21. Elevations (Show whether DF, RT, etc.)	21A. Kind & Status Plug. Bond	21B. Drilling Contractor	22. Approx. Date Work will start
4419 GR	Statewide Blanket Drilling Bond 554 \$25,000.00	Cactus Drilling Corp.	June 12, 1965

## 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"	20#, H-40	400'	300	Circulate
7-7/8"	4-1/2"	9.5#, J-55	4500'	325	Approx. 3500'

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 H. N. Brown Title District Superintendent Date June 10, 1965

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: