|   |                     |  | COLLECT) AP             |              |                              | RILL                  |  |
|---|---------------------|--|-------------------------|--------------|------------------------------|-----------------------|--|
| NO. OF COPIES RECEIVED  |                     | na Code <u>918</u>                     | Telephone No.           | L** 3 8      | 525                          | 1                     |  |
| DISTRIBUTION  | NEW MEN             | LUEVICO OU CONCE                       | WATION COUNTERION       | ı            |                              |                       |  |
| SANTA FE  | NEW                 | NEW MEXICO OIL CONSERVATION COMMISSION |                         |              | Form C-101<br>Revised 1-1-65 |                       |  |
| FILE  |                     |  | HUBBS of Fig            | 5 C          | 5A. Indicate                 | Type of Lease         |  |
| U.S.G.S.  |                     |  |                         | # 11, G. Q.  | STATE                        | X FEE                 |  |
| LAND OFFICE   | +                   |  | Mar 1 7 49              |              | .5. State Oil                | & Gas Lease No.       |  |
| OPERATOR  |                     |  | 7 49                    | HH 65        | E 9                          | 343                   |  |
|   | _ <del></del>       |  |                         |              | iiiiii                       |                       |  |
| APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK               |                     |  |                         |              |                              |                       |  |
| 1a. Type of Work  |                     |  |                         |              |                              | ement Name            |  |
| 25  |                     | prepay C                               |                         |              |                              |                       |  |
| b. Type of Well DRILL X   |                     | DEEPEN                                 | PLUG B                  | PLUG BACK    |                              | 8. Farm or Lease Name |  |
| OIL X GAS WELL  | OTHER               |  | SINGLE MULT             | ZONE         | !<br>  McAle                 | ster - State          |  |
| 2. Name of Operator   | - CHILK             |  |                         |              | 9. Well No.                  | over binie            |  |
| Reading and Ba  | tes, Inc.           |  |                         |              |                              | 1                     |  |
| 3. Address of Operator  |                     |  |                         | · · ·        | 10. Field an                 | d Pool, or Wildcat    |  |
| llth Floor Philtower Bldg., Tulsa, OKLAHOMA 74103                   |                     |  |                         |              | Wildcat                      |                       |  |
|   |                     |  |                         |              | THIT                         |                       |  |
| 4. Location of Well UNIT LETTER LOCATED 1980 FEET FROM THE SOUTH LI |                     |  | LINE.                   |              |                              |                       |  |
| AND 6601 FEET FROM  | THE West LII        | NE OF SEC. 36 TI                       | WP. 8S RGE. 33          | Ekmpm_       |                              |                       |  |
|   |                     |  |                         |              |                              |                       |  |
| (1)   |                     |  |                         |              |                              |                       |  |
|   |                     |  |                         | 4444         | 7771111                      |                       |  |
|   |                     |  |                         |              | Illiii                       |                       |  |
|   |                     | 4444444                                | 9. Proposed Depth 19    | 9A. Formatio | n                            | 20. Rotary or C.T.    |  |
| (1)   |                     |  |                         |              | dres                         | Rotary                |  |
| 21. Elevations (Show whether DF,                                    | RT, etc.) 21A. Kind | & Status Plug. Bond 2                  | lB. Drilling Contractor |              | 22. Approx                   | Date Work will start  |  |
| G. L. 4332.5 one well   |                     | ll(attached)   Sitton & Norton         |                         | on           | 2/24/65                      |                       |  |
| 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"              | 14#                                    | 300'                    | 150          |                              | Surface               |  |
| 7 7/8"  | 4 1/2"              | 9.5#                                   | 4800'                   | 250          |                              | 3850                  |  |
| 1 1/0   | 1 1/2               | 7. 51                                  | 1000                    |              |                              | 3030                  |  |
| Proposed Progra<br>50 ft. interval, a                               |                     |  |                         |              |                              |                       |  |
|   |                     |  |                         |              |                              |                       |  |
|   |                     |  |                         |              |                              |                       |  |
|   |                     |  |                         |              |                              |                       |  |
|   |                     |  |                         |              |                              |                       |  |

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 intermediation above is true and complete to the best of my knowledge and belief.

Signed

Title Vice Pres., Expl. & Prod. Date February 26, 1965

This space for State Use)

APPROVED B4

TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: