				•= :		
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DISTRIBUTION	NEW ME	EXICO OIL CONSER	EVATION COMMISSI	ION	Form C-101	
SANTA FE			HUBBS	OFFICE 8. 0	Revised 1-1-6	35
FILE	,			_	5A. Indicate	Type of Lease
U.S.G.S.			MEN I	11 m M	STATE	
LAND OFFICE		\$	•	11,000 mg	State Oil	& Gas Lease No.
OPERATOR						
		to				
	ON FOR PERMIT TO DI	RILL, DEEPEN, C	OR PLUG BACK	J	7777777	<u>allillillillillillillillillillillillilli</u>
1a. Type of Work					7. Unit Agre	eement Name
DRILL X	. D	EEPEN 🗌	PLU	G BACK 🔲	8, Form or L	N
b. Type of Well	GAS SINGLE X MULTIPLE ZONE ZONE			AULTIPLE [	1 -	
WELL WELL WELL	OTHER		ZONE A	ZONE	Basket	<del> </del>
2. Name of Operator	1	<b>.</b>	C . 1 1 . 1		3. Well No.	
Union Texas Petr 3. Address of Operator	oleum Corp., A	Division o	I Allied Cr	mem1cal_	<u> </u>	nd Pool, or Wildcat
					Cato	ia Popi, or windear
1300 Wilco Bldg		Kas (CO	37.	4-1-	<u> </u>	mmmm
4. Location of Well Unit Lett	TER D LOCATE	10 00U F	EET FROM THE NO	orth Line		
660	West	, sec. 11 TV	WP. 8-S RGE.	30-F		
AND FEET FROM	M THE West	F SEC. LL	THITTITITY	TITITITY	12. County	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
					Chave	
	<del>/////////////////////////////////////</del>	HHHHH	<del>/////////////////////////////////////</del>	HHHH	Tille	HHHHHmi
<del>/////////////////////////////////////</del>	HHHHHH	44444	9, Proposed Depth	19A. Formatio	u 7//////	20. Rotary or C.T.
			3900	San A	Indres	Rotary
21. Elevations (Show whether D.	F, RT, etc.) 21A. Kind &	Status Plug. Bond 2		or Dail I	22. Approx	x. Date Work will start
4140 GL		-Permanent	Ard Dril	ling Co.	Nov	. 22. 1966
23.				_	\	
	PRO	POSED CASING AND	CEMENT PROGRAM			
SIZE OF HOLE	F HOLE SIZE OF CASING WEIGHT PER FOOT SETTING DEPTH SACKS O					EST. TOP
12½" or 11"	8-5/8"	24	500		375	Circ.
6-3/4"	4-1/2"	9.5	3800		300	Base of Salt
	1		ı			
Drill a well to	a TD of 3900'	to test th	e San Andre	s format	ion.	API 3M
Rd Blowout Prev	entor program	will be use	d.			
To update Form	C-101 filed 8-1	10-66				
to apade total	· · · · · · · · · · · · · · · · · · ·	10 00.				
	·					
		•				
			•			
		•				•
		•				
IN ABOVE SPACE DESCRIBE F	PROPOSED PROGRAM: IF PRO	POSAL IS TO DEEPEN O	R PLUG BACK, GIVE DAT	A ON PRESENT PR	ODUCTIVE ZON	E AND PROPOSED NEW PRODUC
hereby certify that the informa		te to the best of my ki	nowledge and belief.	<del> </del>		
11			•			
Signed Ace of 4	7. X	Title Office St	upervisor		Date NOV	. 14, 1966
(This space fo	n Signe (Use)					
(1.11.0 0)					1	
40000VED ===	·	T171 F			DATE	
APPROVED BY		TITLE		<del></del>		

1;

CONDITIONS OF APPROVAL, IF ANY: