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NEW MEXICO OIL CONSERVATION COMMISSION
HOBBS OFFICE O. C. C.

Form C-101
Revised 1-1-65

JAN 27 11 23 AM '67

5A. Indicate Type of Lease	
STATE <input checked="" type="checkbox"/>	FEE <input type="checkbox"/>
5. State Oil & Gas Lease No.	
K-3259	

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work				7. Unit Agreement Name	
b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>				8. Farm or Lease Name	
DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>				New Mexico "H" State	
SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>				9. Well No.	
2. Name of Operator				6	
Sun Oil Company				10. Field and Pool, or Wildcat	
3. Address of Operator				Und. Cato - San Andres	
P. O. Box 2880, Dallas, Texas 75221					
4. Location of Well				12. County	
UNIT LETTER B LOCATED 660 FEET FROM THE North LINE				Chaves	
AND 1980 FEET FROM THE East LINE OF SEC. 16 TWP. 8S RGE. 30E NMPM					
				19. Proposed Depth	
				3600'	
				19A. Formation	
				Milnesand	
				20. Rotary or C.T.	
				Rotary	
21. Elevations (Show whether DF, RT, etc.)		21A. Kind & Status Plug. Bond		21B. Drilling Contractor	
4079' Gr.		\$10,000 Blanket Bond		Unknown	
				22. Approx. Date Work will start	
				When Approved	

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#	450'	300'	Circ. to surface
7-7/8'	4-1/2'	9.5#	3600'	300'	1470'

From 450' to Total Depth, the hole will be drilled using Series 600 (2000 psi test) blowout prevention equipment.

A Series 600 wellhead will be used if well is successfully completed.

EXPIRES 4-25-67

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 F. A. Lawrence Title Asst. Division Supt. Date January 25, 1967
(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: