

3-5-70

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 <input type="checkbox"/> FEE <input checked="" type="checkbox"/>	
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
8. Farm or Lease Name <b>Boyle</b>	
9. Well No. <b>1</b>	
10. Field and Pool, or Wildcat <b>Wildcat</b>	
12. County <b>Chaves</b>	
19. Proposed Depth <b>4200</b>	19A. Formation <b>San Andres</b>
20. Rotary or C.T. <b>Rotary</b>	
21. Elevations (Show whether DF, RT, etc.)	21A. Kind & Status Plug. Bond <b>Blanket</b>
21B. Drilling Contractor <b>Ard Drilling Company</b>	
22. Approx. Date Work will start <b>Upon Approval</b>	

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK	
1a. Type of Work DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>	
b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>	
2. Name of Operator <b>Coastal States Gas Producing Company</b>	
3. Address of Operator <b>c/o Oil Reports &amp; Gas Services, Box 763, Hobbs, New Mexico</b>	
4. Location of Well UNIT LETTER <b>M</b> LOCATED <b>660</b> FEET FROM THE <b>North</b> LINE AND <b>660</b> FEET FROM THE <b>West</b> LINE OF SEC. <b>5</b> TWP. <b>6 S</b> RGE. <b>31 E</b> NMPM	
23. PROPOSED CASING AND CEMENT PROGRAM	

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
<b>11</b>	<b>8 5/8</b>	<b>24</b>	<b>375</b>	<b>300</b>	<b>Circ</b>
<b>7 7/8</b>	<b>4 1/2</b>	<b>9.5</b>	<b>4200</b>	<b>350</b>	<b>2800</b>

3-5-70

24 HOURS WORKING 8 5/8  
CASING

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 *J. L. Smith* Title Agent Date 12/3/69

(This space for State Use)  
APPROVED BY *[Signature]* TITLE SUPERVISOR DISTRICT DATE 5 1969  
CONDITIONS OF APPROVAL, IF ANY:

**NEW MEXICO OIL CONSERVATION COMMISSION  
WELL LOCATION AND ACREAGE DEDICATION P.**

Form C-102  
Supersedes C-128  
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

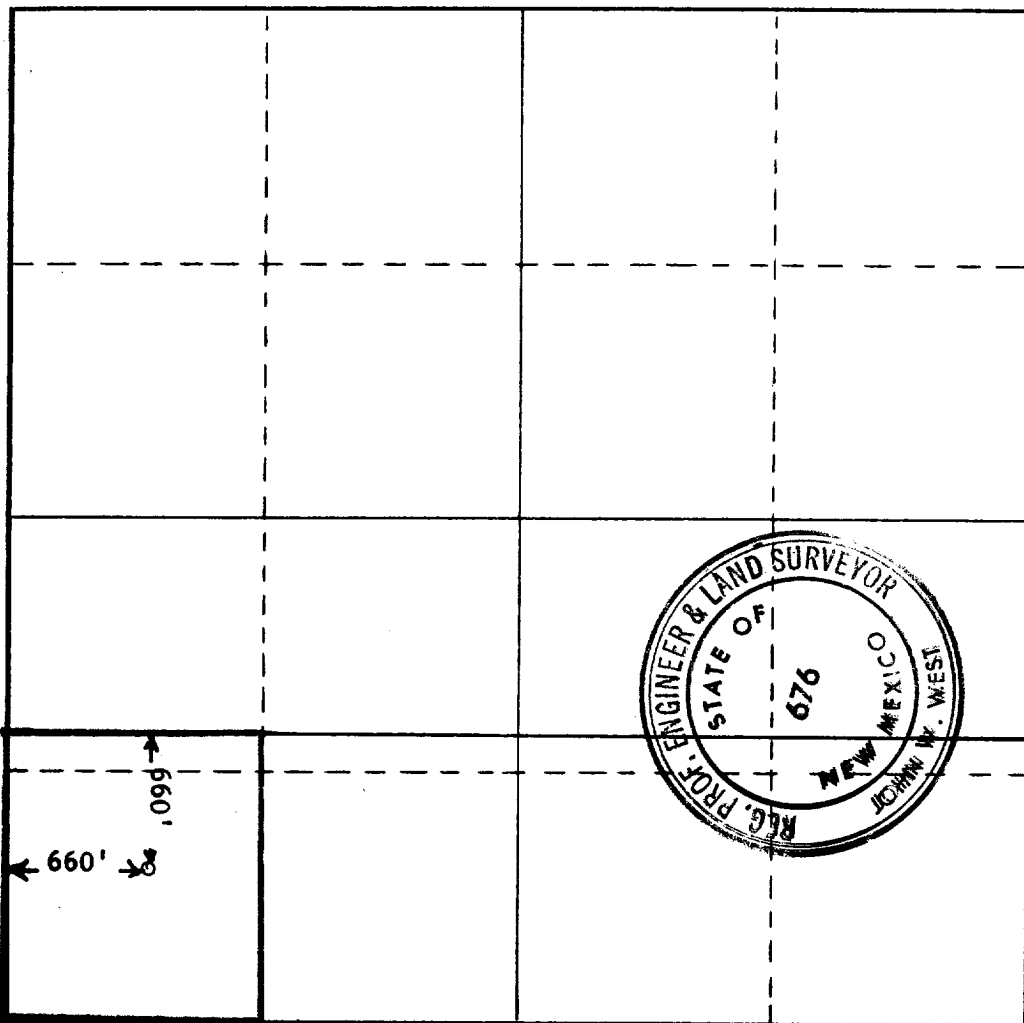
Operator <b>COASTAL STATES GAS PRODUCING CO.</b>			Lease <b>BOYLE</b>		Well No. <b>1</b>
Unit Letter <b>M</b>	Section <b>5</b>	Township <b>T6S</b>	Range <b>R31E</b>	County <b>CHAVES</b>	
Actual Footage Location of Well:					
<b>660</b> feet from the <b>NORTH</b> line and		<b>660</b> feet from the <b>WEST</b> line			
Ground Level Elev.	Producing Formation <b>San Andres</b>	Pool <b>Wildcat</b>	Dedicated Acreage: <b>45.3</b> Acres		

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes    ☐ No    If answer is "yes," type of consolidation \_\_\_\_\_

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



**CERTIFICATION**

*I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.*

Name Donna Kolles  
Position **Agent**  
Company **Coastal States Gas Prod. Co.**  
Date **12/5/69**

*I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.*

**DECEMBER 5, 1969**  
Date Surveyed  
  
Registered Professional Engineer  
and/or Land Surveyor  
John W. West  
Certificate No. **676**

0 330 660 990 1320 1650 1980 2310 2640 2000 1500 1000 500 0