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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.	
L-5120	

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 checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name	
2. Name of Operator		9. Well No.	
Union Oil Company of California		2	
3. Address of Operator		10. Field and Pool, or Wildcat	
P. O. Box 671, Midland, Texas 79702		(Undesignated Tomahawk San Andres)	
4. Location of Well		12. County	
UNIT LETTER <u>H</u> LOCATED <u>1980</u> FEET FROM THE <u>North</u> LINE		Chaves	
AND <u>660</u> FEET FROM THE <u>East</u> LINE OF SEC. <u>36</u> TWP. <u>7-S</u> RGE. <u>31-E</u> NMPM			
		19. Proposed Depth	19A. Formation
		4350'	San Andres
		20. Rotary or C.T.	
		Rotary	
21. Elevations (Show whether DF, KT, etc.)	21A. Kind & Status Plug. Bond	21B. Drilling Contractor	22. Approx. Date Work will start
4438' GL	Blanket	WEK Drilling Co., Inc.	On Approval

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
11"	8-5/8" OD	24#	1770'	500	Circ to surface
7-7/8"	5-1/2" OD	15.5#	4350'	500	To be determined

3000# WP Hydraulic BOP to TD

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. R. Hughes Title District Drlg. Supt. Date 7-2-79
(This space for State Use)

SUPERVISOR DISTRICT 1

APPROVED BY [Signature] TITLE [Signature] DATE [Signature]
CONDITIONS OF APPROVAL, IF ANY: