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# NEW MEXICO OIL CONSERVATION COMMISSION

Form O-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.	

## 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 J. L. Reed	
2. Name of Operator CABOT CORPORATION		9. Well No. 1	
3. Address of Operator P. O. Box 1101, Pampa, TX 79065		10. Field and Pool, or Wildcat King Devonian	
4. Location of Well UNIT LETTER H LOCATED 1980' FEET FROM THE North LINE AND 660' FEET FROM THE East LINE OF SEC. 35 TWP. 13S RGE. 37E NMPM		12. County Lea	
19. Proposed Depth 11,020'		19A. Formation Penn	
20. Rotary or C.T. Rotary		21. Elevations (Show whether DF, RT, etc.) 3856' DF	
21A. Kind & Status Plug. Bond Blanket on File		21B. Drilling Contractor N/A	
22. Approx. Date Work will start 12-1-77			

23.

## PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17-1/2"	13-3/8"	48	334	400	Surface
11"	8-5/8"	24 & 32	4577	2400	Surface
7-7/8"	5-1/2"	17, 20 & 23	12590	700	8770'

Well will be tested in the Mississippian 11,420'-11,470' before testing the Penn 10,750'-11,020'.

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 [Signature] Title SR PER ENGR Date 10-21-77  
(This space for State Use)

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

4410

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CONSERVATION CLUB  
[illegible]

NEW KICO OIL CONSERVATION COMMISSION  
WELL LOCATION AND ACREAGE DEDICATION PLAT

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

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

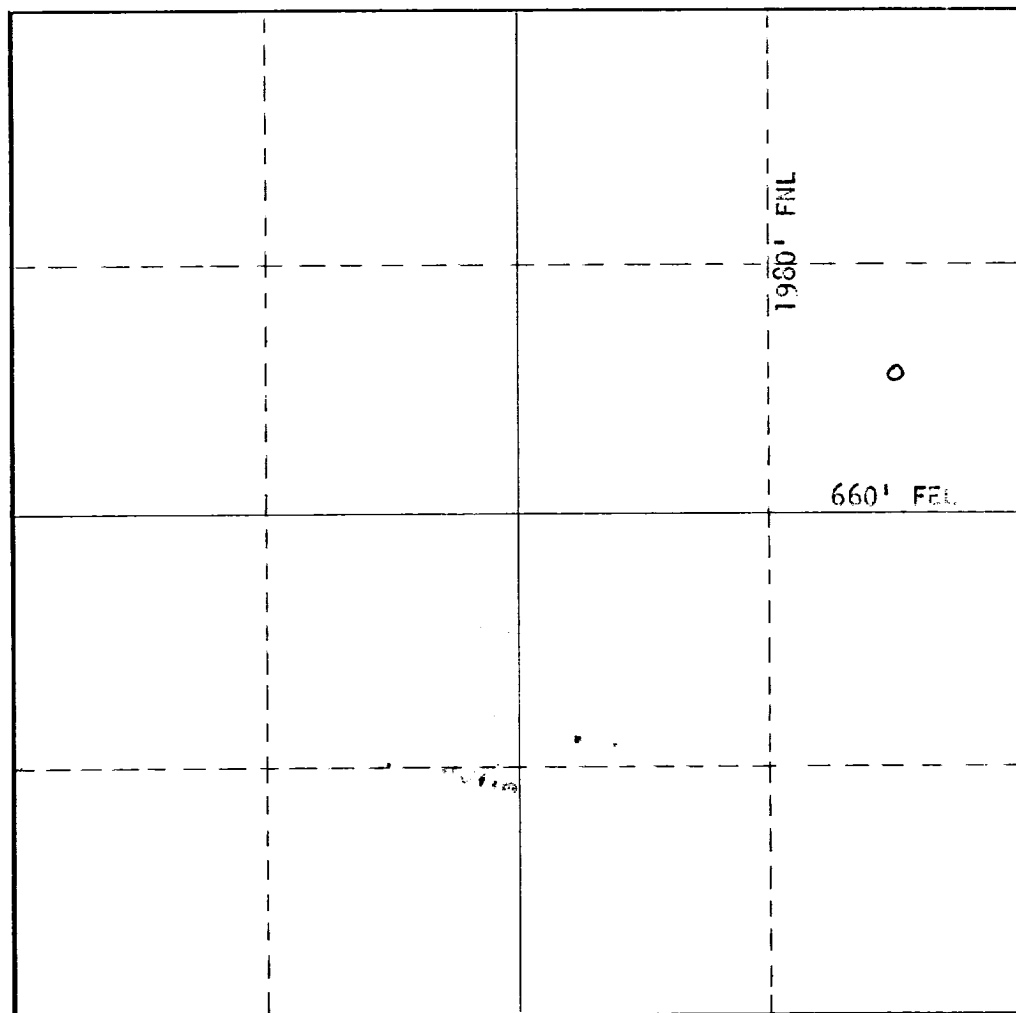
Operator <b>CABOT CORPORATION</b>			Lease <b>J. L. Reed</b>		Well No. <b>1</b>
Unit Letter <b>H</b>	Section <b>35</b>	Township <b>13South</b>	Range <b>37East</b>	County <b>Lea</b>	
Actual Footage Location of Well: <b>1980</b> feet from the <b>North</b> line and <b>660</b> feet from the <b>East</b> line					
Ground Level Elev. <b>3844'</b>	Producing Formation <b>Devonian</b>		Pool <b>King</b>	Dedicated Acreage: <b>40</b> Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure 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.

*Robert N. Johnson*  
Name **Robert N. Johnson**

Position **Senior Petroleum Engineer**

Company  
**CABOT CORPORATION**

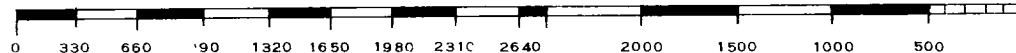
Date  
**October 19, 1977**

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.

Date Surveyed

Registered Professional Engineer  
and/or Land Surveyor

Certificate No.



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