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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101  
Revised 1-4-65

5A. Indicate Type of Lease
STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
5. State Oil & Gas Lease No. <b>OG - 801</b>

## 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 <b>State "A"</b>	
2. Name of Operator <b>Texas Pacific Oil Company</b>		9. Well No. <b>2</b>	
3. Address of Operator <b>P. O. Box 1096, Hobbs, New Mexico</b>		10. Field and Pool, or Wildcat <b>North Ranger Lake</b>	
4. Location of Well UNIT LETTER <b>N</b> LOCATED <b>1980'</b> FEET FROM THE <b>West</b> LINE AND <b>660'</b> FEET FROM THE <b>South</b> LINE OF SEC. <b>14</b> TWP. <b>12-S</b> RGE. <b>34-E</b> NMPM		12. County <b>Lea</b>	
19. Proposed Depth <b>10,350</b>		19A. Formation <b>Bough "B"</b>	
20. Rotary or C.T. <b>Rotary</b>		21. Elevations (Show whether DE, RT, etc.) <b>4151.4</b>	
21A. Kind & Status Plug. Bond <b>Required bond on File</b>		21B. Drilling Contractor <b>Not selected</b>	
22. Approx. Date Work will start <b>Receipt of permit</b>			

## PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17"	13-3/8"	48#	350'	350	Circulate
11"	8-5/8"	24-32#	4200'	1500	Circulate
7 7/8"	4-1/2"	11.6#	10,350'	600	Tie into Abo

APPROVAL VALID  
FOR 90 DAYS UNLESS  
DRILLING COMMENCED,  
EXPIRES **1-2-67**

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 [Signature] Title **Area Superintendent** Date **10-28-66**

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: