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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101  
Revised 1-1-65. O. C.

5A. Indicate Type of Lease  
STATE ☒ FEE ☒

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"/> DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>		8. Farm or Lease Name WILBO "A"	
2. Name of Operator Eason Oil Company		9. Well No. 1	
3. Address of Operator c/o Cima Capitan, Inc., Box 1343, Artesia, New Mex.		10. Field and Pool, or Wildcat Wildcat	
4. Location of Well UNIT LETTER C LOCATED 660 FEET FROM THE North LINE AND 1980 FEET FROM THE West LINE OF SEC. 22 TWP. 13S RGE. 33E NMPH		12. County Lea	
18. Proposed Depth 13500		19A. Formation Devonian	
20. Rotary or C.T. Rotary		21. Elevations (Show whether DF, RT, etc.)	
21A. Kind & Status Plug. Bond Statewide		21B. Drilling Contractor	
22. Approx. Date Work will start 15 Oct. 1966		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	350	350	Surface
12 1/4"	9 5/8"	32-40	4000	500	2000'
8 3/4"	5 1/2"	various	13500	810	8900'

We propose to drill this well to test the Devonian which is projected at 12840 feet. We will test any possible pays in the Wolfcamp and Pennsylvanian formations. Our blow out prevention equipment will be one Hydril and two QRC preventers with remote controls.

APPROVAL VALID  
FOR 90 DAYS UNLESS  
DRILLING COMMENCED.  
EXPIRES 1-10-67

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 Agent Date 3 Oct 66  
(This space for State Use)

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