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NEW MEXICO OIL CONSERVATION COMMISSION

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

5A. Indicate Type of Lease	DATE 3-26-67 FEE <input type="checkbox"/>
5. State Oil & Gas Lease No.	K-6659

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"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name Hobbs "Y"	
2. Name of Operator Shelly Oil Company		9. Well No. 1	
3. Address of Operator Box 730 - Hobbs, New Mexico		10. Field and Pool, or Wildcat Undesignated	
4. Location of Well UNIT LETTER "J" LOCATED 1900 FEET FROM THE South LINE AND 1900 FEET FROM THE East LINE OF SEC. 29 TWP. 12-S RGE. 34-E NMPM		12. County Lea	
19. Proposed Depth 10500'		19A. Formation Pennsylvanian	20. Rotary or C.T. Rotary
21. Elevations (Show whether DF, RT, etc.) Unknown	21A. Kind & Status Plug Bond Blanket Bond. No. 1253688 \$100000 with Fed. Ins.	21B. Drilling Contractor Hendo Drilling Company	22. Approx. Date Work will start Immediately

23. **Co.** PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17-1/2"	11-3/4" OD	31.20#	420'	400	Surface
11"	8-5/8" OD	32#	4250'	600	1350'
7-7/8"	5-1/2" OD	17#	10500'	600	7900'

The pump and plug process will be used in cementing all strings of casing and cement will be circulated to the surface on the 11-3/4" OD surface casing. The 5-1/2" OD casing will be perforated and the Pennsylvanian Formation treated with approximately 500 gallons Mud Acid.

EXPIRES **5-21-67**

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 **(ORIGINAL) V. E. Fletcher** Title **District Superintendent** Date **February 28, 1967**
(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

