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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-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"/> DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input checked="" type="checkbox"/>		8. Farm or Lease Name Hannah	
2. Name of Operator MORGAN COMPANY		9. Well No. 1	
3. Address of Operator 101 North Maricopa, Midland, Texas 79701		10. Field and Pool, or Wildcat UNDESIGNATED	
4. Location of Well UNIT LETTER E LOCATED 1980 FEET FROM THE North LINE AND 660 FEET FROM THE West LINE OF SEC. 30 TWP. 14 N RGE. 36 E NMPM		12. County Lee	
21. Elevations (Show whether DF, RT, etc.) Furnish later		19. Proposed Depth 11,500'	20. Rotary or C.T. Rotary
21A. Kind & Status Plug. Bond Blanket	21B. Drilling Contractor Lower Wolfcamp & Glaco		22. Approx. Date Work will start 7-17-67

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
15"	11 3/4"	428	400'	400	Circ. to Surface
10 5/8"	8 5/8"	248 & 328	4650'	500	2000'
7 7/8"	4 1/2"	13.5 & 11.6	11,500'	200	10,500'

Drill 15" hole to 400' and set 11 3/4" casing and cement to surface. Drill 10 5/8" hole to 4650 and cement w/500 sz. Drill 7 7/8" hole to approximately 11,500' and log. Set and cement 4 1/2" casing w/200 sz. Hole will be drilled w/fluid system. Perforate and treat any zones which indicate they would be commercially productive of oil or gas. Drill stem test all shows of oil or gas. BOP: Ser. 900 hydrill & Ser 1500 dbl hyd.

Expires 10-16-67

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 *W. W. W. W.* Title District Production Superintendent 7-7-67

(This space for State Use)

APPROVED BY *J. C. Ramsey* TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: