CONDITIONS OF APPRO	OVAL, IF	ANY:		TITLE			DATE		
	2 1	10/12			r Pagar				
Signed (This s	pace for S	State Use)		Title Opera			Date_		
gald.	In ormatio	\mathcal{M}		_			. Bat	ober 21, 19	47
IN ABOVE SPACE DESC TIVE ZONE, GIVE BLOWOUT I hereby certify that the i	PREVENTE	R PROGRAM, IF A	NY.			OH PRESENT P		Z AND INCODED NEW PI	
IN ABOVE SPACE DESC	DIRE DO	OBOSED PEOCE) A M+ 1F PP 1	POSAL IS TO DEEDE	N OR PLUG BACK GIVE DAT	A ON PRESENT B	RODUCTIVE 70%	E AND PROPOSED MEW P	RODUC-
AMEDISE C	neeb	derive in	OM 41,	,900' to 1	.A., 200				
A 3 3	R		++	9001 6- 1	o saal				
				•					
			44.72		***	***			
7-7/8"		5-1/2"	1716		19 506'	200	274	11,700'	
				<u>-</u> रसक	* ** **	40 %		**************************************	
			3211	J 900'	46001	354	exe	30001	
12-3/4"		8-5/8"	281b 321b	# 2600'			······································		
15-1/3"		13-3/8"	-	48 lbs H	362'	400	83:8	surface	
SIZE OF HOL	E	SIZE OF CA	SING W	EIGHT PER FO		TH SACKS C	F CEMENT	EST. TOP	
23.			PRO	POSED CASING A	ND CEMENT PROGRAM				
37951				atevide	Ard Drillin			ning: 10/21	
21. Elevations (Show who	ether DF,	RT, etc.) 21.	A. Kind & S	Status Plug. Bond	21B. Drilling Contracto	Devon		Rotery x. Date Work will start	
	1111		11111		19. Proposed Depth	19A. Formati		20. Rotary or C.T.	~~~
									lll
							Lea	IIIIIA	UL
AND 1224.7 FE	ET FROM T	THE BOST	LINE O	F SEC.	TWP. 138 RGE.	NMPM	12. County	milliti	111
_		_		96					
4 Location of Well	IT LETTER	vington,		. 1980	FEET FROM THE	uth Line	111111		///
3. Address of Operator	· •		***	lamit a m			1	nd Pool, or Wildcat	
CORDON N	l. C 01						5, Well 140.	L	
2. Name of Operator	ELL	OTHER			SINGLE ZONE	ZONE ZONE	9. Well No.		
b. Type of Well	LL		D	EEPEN 🗵		JG BACK	8. Farm or I		
1a. Type of Work							7. Unit Agre	sement Name	
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK									
OPERATOR							min	mmm	~
LAND OFFICE					·	1 1177	.5. State Oil	& Gas Lease No.	
FILE U.S.G.S.					CCT	$\sim G$	5A. Indicate	e Type of Lease	
SANTA FE			NEW ME	AICO OIL CONS	ERVATION COMMISS		Revised 1-1-		
DISTRIBUTION	D .		NEWME	צוכם חון בחמי	ERVATION COMMISS	ION	Form C-101		
NO OF CODICE DECENTE	. 1								