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# NEW MEXICO OIL CONSERVATION COMMISSION

30-004-2-4527  
Form C-101  
Revised 1-1-65

5A. Indicate Type of Lease	
STATE <input checked="" type="checkbox"/>	FEE <input type="checkbox"/>
5. State Oil & Gas Lease No. <b>L-110</b>	

## APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>		7. Unit Agreement Name	
b. Type of Well 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 36</b>	
2. Name of Operator <b>Coastal States Gas Producing Company</b>		9. Well No. <b>1</b>	
3. Address of Operator <b>c/o Oil Reports &amp; Gas Services, Box 763, Hobbs, New Mexico</b>		10. Field and Pool, or Wildcat <b>Under N. Baum Upper Penn</b>	
4. Location of Well UNIT LETTER <b>G</b> LOCATED <b>1980</b> FEET FROM THE <b>North</b> LINE AND <b>1980</b> FEET FROM THE <b>East</b> LINE OF SEC. <b>36</b> TWP. <b>13 S</b> RGE. <b>32 E</b> NMPM		12. County <b>Lea</b>	
19. Proposed Depth <b>10,000</b>		19A. Formation <b>Upper Penn</b>	
20. Rotary or C.T. <b>Rotary</b>		21. Elevations (Show whether DF, RT, etc.)	
21A. Kind & Status Plug. Bond <b>Blanket</b>		21B. Drilling Contractor <b>Moran</b>	
22. Approx. Date Work will start <b>10/13/69</b>			

23.

## PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
<b>17 1/2</b>	<b>13 3/8</b>	<b>48#</b>	<b>350</b>	<b>350</b>	<b>Circ.</b>
<b>11</b>	<b>8 5/8</b>	<b>24# &amp; 32#</b>	<b>4100</b>	<b>300</b>	<b>3000</b>
<b>7 7/8</b>	<b>5 1/2</b>	<b>17#</b>	<b>10,000</b>	<b>200</b>	<b>8850</b>

THE COMMISSION MUST BE NOTIFIED  
24 HOURS PRIOR TO RUNNING **13 3/8**  
CASING

1-14-70

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 **H. L. Smith** Title **Agent** Date **10/10/69**

(This space for State Use)

APPROVED BY **[Signature]** TITLE **SUPERVISOR DISTRICT 1** DATE **OCT 14 1969**

CONDITIONS OF APPROVAL, IF ANY:

NEW MEXICO OIL CONSERVATION COMMISSION  
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102  
Supersedes C-128  
Effective 1-1-65

All distances must be from the outer boundaries of the Section

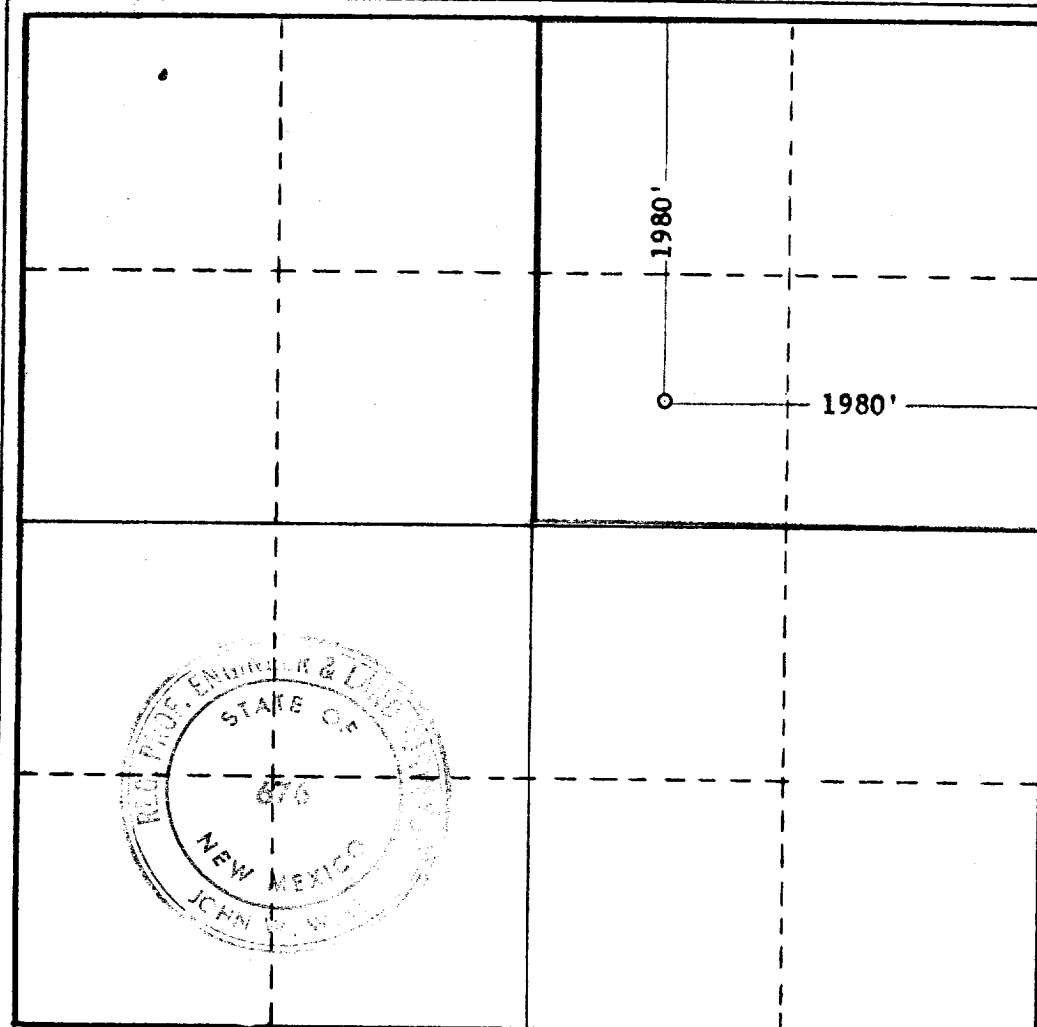
Operator <b>COASTAL STATES GAS PRODUCING CO.</b>			Lease <b>STATE 36</b>		Well No. <b>1</b>
Unit Letter <b>G</b>	Section <b>36</b>	Township <b>13 SOUTH</b>	Range <b>32 EAST</b>	County <b>LEA</b>	
Actual Footage Location of Well: <b>1980</b> feet from the <b>NORTH</b> line and <b>1980</b> feet from the <b>EAST</b> line					
Ground Level Elev. <b>4292</b>	Producing Formation <b>Upper Penn</b>		Pool <b>Undes. Baum</b>	Dedicated Acreage: <b>160</b> Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation \_\_\_\_\_

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name A. L. Smith  
Position Agent  
Company Coastal States Gas Prod. Co.  
Date October 10, 1969

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed OCT. 6, 1969

Registered Professional Engineer and/or Land Surveyor

John W. West  
Certificate No. 676

0 330 660 990 1320 1650 1980 2310 2640 2970 3300 3630 3960 4290 4620 4950 5280 5610 5940 6270 6600