

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

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. K 678
7. Unit Agreement Name
8. Farm or Lease Name Shell State
9. Well No. 1
10. Field and Pool, or Wildcat Wildcat
12. County Lea
19. Proposed Depth 10,700
19A. Formation Pennsylvanian
20. Rotary or C.T.
21. Elevations (Show whether DF, RT, etc.) 4135 Gr
21A. Kind & Status Plug. Bond Active
21B. Drilling Contractor Unknown
22. Approx. Date Work will start Immediately

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"/>
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"/>
2. Name of Operator Midwest Oil Corporation
3. Address of Operator 1500 Wilco Bldg., Midland, Texas 79701
4. Location of Well, UNIT LETTER K LOCATED 1980 FEET FROM THE South LINE AND 1980 FEET FROM THE West LINE OF SEC. 32 TWP. 14-SRGE. 34-E NMMP
21. Elevations (Show whether DF, RT, etc.) 4135 Gr
21A. Kind & Status Plug. Bond Active
21B. Drilling Contractor Unknown
22. Approx. Date Work will start Immediately

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	31.2	400	400	Circ.
11	8-5/8	24 & 32	4500	400	
7-7/8	5-1/2	17	10700	650	

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 Carolyn Turner Title Production Clerk Date 12-5-69
(This space for State Use)
APPROVED BY [Signature] TITLE Commissioner DATE 12-5-69
CONDITIONS OF APPROVAL, IF ANY: