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LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

5A. Indicate Type of Lease

STATE [X]   FEE [ ]

5. State Oil & Gas Lease No.

L-6933

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work

DRILL [X]   DEEPEN [ ]   PLUG BACK [ ]

b. Type of Well

OIL WELL [X]   GAS WELL [ ]   OTHER   SINGLE ZONE [X]   MULTIPLE ZONE [ ]

2. Name of Operator

Amini Oil Company

3. Address of Operator

405 Wall Towers East - Midland, Tx. 79701

4. Location of Well   UNIT LETTER ___K___   LOCATED ___1873___ FEET FROM THE ___South___ LINE

AND ___2086___ FEET FROM THE ___West___ LINE OF SEC. ___31___ TWP. ___14S___ RGE. ___34E___ NMPM

7. Unit Agreement Name

8. Farm or Lease Name

Superior State

9. Well No.

1

10. Field and Pool, or Wildcat

Undesignated

12. County

Lea

19. Proposed Depth	19A. Formation	20. Rotary or C.T.
10,500'	Pennsylvanian	Rotary

21. Elevations (Show whether DF, RT, etc.)	21A. Kind & Status Plug. Bond	21B. Drilling Contractor	22. Approx. Date Work will start
4154.1 GR	Blanket on File	Amini Drilling Co.	As soon as possible

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
15"	12-3/4"	32.38#	390'	350	Surface
11"	8-5/8"	24 & 32#	4200'	400	2500'
7-7/8"	5½"	17#	10500'	400	7900'

APPROVAL VALID
FOR 90 DAYS UNLESS
DRILLING COMMENCED,
EXPIRES ___7-1-74___

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUC-TIVE 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 _Karen Stephenson_   Title ___Agent___   Date ___3-29-74___

(This space for State Use)

APPROVED BY _____   TITLE _____   DATE _____

CONDITIONS OF APPROVAL, IF ANY: