

Submit to Appropriate
District Office
State Lease - 6 copies
Fee Lease - 5 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

API NO. (assigned by OCD on New Wells)

30-025-30611

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

LG7347

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL ☒

RE-ENTER ☐

DEEPEN ☐

PLUG BACK ☐

b. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER ☐

SINGLE
ZONE ☐

MULTIPLE
ZONE ☐

7. Lease Name or Unit Agreement Name

State 36 "F"

2. Name of Operator

MWJ PRODUCING COMPANY

8. Well No.

#1

3. Address of Operator

400 W. Illinois - Suite 1100 Midland, Texas 79701

9. Pool name or Wildcat

East Hightower Upper Penn

4. Well Location

Unit Letter

F

: 1980

Feet From The North

Line and

1980

Feet From The

West

Line

Section

36

Township

12 South

Range

33 East

NMPM

Lea

County

10. Proposed Depth

10,550'

11. Formation

Cisco

12. Rotary or C.T.

Rotary

13. Elevations (Show whether DF, RT, GR, etc.)

4225.5' GL

14. Kind & Status Plug. Bond

Blanket/current

15. Drilling Contractor

Unknown

16. Approx. Date Work will start

6/1/89

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17-1/2"	13-3/8"	48#	400'	400 sx	surface
11"	8-5/8"	24# & 32#	4200'	350 sx	3000'
7-7/8"	5-1/2"	17#	10550'	450 sx	9500'

Will utilize Double Ram BOP after surface casing has been set and cemented to total depth. Will test to 1000 psi for 30 minutes. Will confirm top of cement with temperature survey or circulate.

Gas is not dedicated.

Cement on the 8 5/8" casing must be placed from surface of the salt or from the surface casing by means of casing plug cement or a float at the top of the salt.

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

SIGNATURE

Pat Drexler

TITLE

Pat Drexler

Agent

DATE 5/9/89

TYPE OR PRINT NAME

TELEPHONE NO (915) 682-5216

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY

DATE

MAY 11 1989

Permit Expires 6 Months From Approval
Date Unless Drilling Underway.