

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

OIL CONSERVATION DIVISION

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

DISTRICT I
P.O. Box 1960, Hobbs, NM 88240

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

DISTRICT III
1000 New Britain Rd., Aztec, NM 87410

API NO. (assigned by OGD on New Wells)
30-025-30702
5. Indicate Type of Lease STATE ☐ FEE ☒
6. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK					
1a. Type of Work: DRILL ☒ RE-ENTER ☐ DEEPEN ☐ PLUG BACK ☐				7. Lease Name or Unit Agreement Name Lowe "A"	
b. Type of Well: OIL WELL ☐ GAS WELL ☐ OTHER ☐				8. Well No. #1	
2. Name of Operator Manzano Oil Corporation 505/623-1996				9. Field Name or Wellhead King Devonian	
3. Address of Operator P.O. Box 2107, Roswell, NM 88202-2107					
4. Well Location Unit Letter <u>M</u> : <u>900</u> Feet From The <u>South</u> Line and <u>50</u> Feet From The <u>West</u> Line					
Section <u>25</u> Township <u>13S</u> Range <u>37E</u> NMPM Lea County					
10. Proposed Depth 12,500'		11. Formation Devonian		12. Kind of C.T. Rotary	
13. Elevations (Show whether DF, RT, GR, etc.) -3855' GR 3856.6		14. Kind & Status Plug Bond Blanket		15. Drilling Contractor WEK	
16. Approx. Date Work will start					
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"	54.5#	450'	425	circul
11"	8-5/8"	32# & 24#	4,700'	1800	circul
7-7/8"	5-1/2"	20# & 17#	12,500'	220	8000'

BOP's 10 series 900 Type E Shaffer Double Hydraulic 6000 psi test - 3000 psi working pressure

NOTE: APPLICATION RESUBMITTED AFTER CANCELTION ON 9/19/91.

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 Laura J. King TITLE Production Analyst DATE 3/6/92
TYPE OR PRINT NAME Laura J. King TELEPHONE NO 505-623-1996

(This space for State Use)

Orig. Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE MAR 20

CONDITIONS OF APPROVAL, IF ANY:

Permit Expires 6 Months From Approval
Date Unless Drilling Underway.

742-R-8989