

PRIVATE AND CONFIDENTIAL

NEW MEXICO OIL CONSERVATION COMMISSION

JUN 16 9 50 AM '69

Form C-101
Revised 1-1-65

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FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

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

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>		8. Farm or Lease Name	
OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Stratigraphic Test SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		Shell Strat	
2. Name of Operator Shell Oil Company		9. Well No. 14-69	
3. Address of Operator P. O. Box 1509, Midland, Texas 79701		10. Field and Pool, or Wildcat Wildcat	
4. Location of Well UNIT LETTER _____ LOCATED _____ FEET FROM THE _____ LINE AND _____ FEET FROM THE _____ LINE OF SEC. 19 TWP. 1-S RGE. 31-E NMPM		12. County Roosevelt	
		19. Proposed Depth 3100'	19A. Formation Glorieta
		20. Rotary or C.T. Rotary	
21. Elevations (Show whether DF, RT, etc.) Not Available	21A. Kind & Status Plug. Bond Blanket	21B. Drilling Contractor Not Available	22. Approx. Date Work will start On Approval

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
	8 5/8"	32#, 24#	350' *		On Circ.

***Sufficient casing to penetrate red beds.**

To be drilled for geological information only, not to be produced.

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 J.D. Duren **J.D. Duren** Title Staff Petrophysical Engineer Date June 13, 1969

(This space for State Use)

APPROVED BY [Signature] TITLE Dist. Super. DATE 6-16-69

CONDITIONS OF APPROVAL, IF ANY: