NO. OF COPIES	RECEIVED								
DISTRIBL			NEW	MEXICO OIL CONS	ERVATION COMMISSIO)N	Form C-101		
SANTA FE	SANTA FE NEW MEXICO OIL CONSERVATION COMMISSION						Revised 1-1-6	35	
FILE	,			·			5A. Indicate	Type of Lease	
U.S.G.S.							STATE	FEE X	
LAND OFFIC	E						.5, State Oil	& Gas Lease No.	
OPERATOR									
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK									
la. Type of Work								eement Name	
DRILL X re-entry DEEPEN PLUG BACK									
b. Type of Well								ease Name	
OIL GAS WELL OTHER SWD SINGLE X MULTIPLE ZONE								lor	
2. Name of Operator								9. Well No.	
Energy Reserves Group, Inc.							1		
3. Address of Operator D. O. Doy, 2427, Midland, Mayor, 70702							10. Field and Pool, or Wildcat		
P.O. Box 2437, Midland, Texas 79702							Undesignated		
4. Location of Well unit letter C located 660 feet from the N line									
100	20		T.T	1 1	60	2217			
AND 198	SU FEET FR	THE	W	E OF SEC. 11	TWP. 65 RGE.	33E NMPM	12. County	<i>11111111111</i>	
							Rooseve]	1+ /////////	
HHHH	++++++	HHHH	///////	/////////////////////////////////////	HHHHHH	++++++	777777	HHHH	
444444	+++++	<i>HHH</i>	++++++	/////////////////////////////////////	19. Proposed Depth	19A. Formation	,	20, Rotary or C.T.	
					4440	San Andr	es	Rotary	
21. Elevations (Show whether	DF, RT; etc.)	21A. Kind	& Status Flug. Bond	21B. Drilling Contractor			. Date Work will start	
440	8' GL		Blank	tet			7,	/27 <i>†</i> 74	
23.			Р	ROPOSED CASING A	ND CEMENT PROGRAM				
· · · · · · · · · · · · · · · · · · ·									
17 1/2		13 3		48	381	365	CEMENT	EST. TOP Surf	
12 1/4		8 5		23 & 32	3509	1700		Surf	
			0/0	23 & 32	3309	1700		BULL	
		Ì				1			
The above casing is already in place. No additional casing is planned.									
in the second of									
No new location survey was made. Attached is a copy of the original C-102.									
1.1 1.1 CALLED ALL OF THE SHOPE AND COPY OF CHECKET OF THE CALLED									
IN ABOVE SPACE	E DESCRIBE	PROPOSED	PROGRAM: IF I	PROPOSAL IS TO DEEPEN	OR PLUG BACK, GIVE DATA	ON PRESENT PRO	DUCTIVE ZONE	: AND PROPOSED NEW PRODUC	
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.									
O . O									
Signed //	1/1-	R.L. I	Robertson	Title Product	ion Engineer II	<u> </u>	Date	/85 	
(This space for State Use)									
ORIGINAL SEGNED RY SERVEN								PR - 8 1985	
APPROVED BY							PATE	H IV U 1000	

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

APR - 4 1985