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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 <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
5. State Oil & Gas Lease No. <u>B-11078</u>
7. Unit Agreement Name
8. Farm or Lease Name <u>Lea "CL" State (WCTA)</u>
9. Well No. <u>1</u>
10. Field and Pool, or Wildcat <u>Indes (Canyon)</u>
12. County <u>Lea</u>
19. Proposed Depth
19A. Formation
20. Rotary or C.T.
21. Elevations (Show whether DF, RT, etc.) <u>4301' GL</u>
21A. Kind & Status Plug. Bond
21B. Drilling Contractor
22. Approx. Date Work will start

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work
b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> DRILL <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input checked="" type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>
2. Name of Operator <u>Gulf Oil Corp.</u>
3. Address of Operator <u>P. O. Box 670, Hobbs, NM 88240</u>
4. Location of Well UNIT LETTER <u>G</u> LOCATED <u>2651</u> FEET FROM THE <u>North</u> LINE AND <u>1650</u> FEET FROM THE <u>East</u> LINE OF SEC. <u>2</u> TWP. <u>16S</u> RGE. <u>32E</u> NMPM
23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP

Plugging + plug. Set plug in plug @ 13,095' test plug + plug
1000 psi. Circ hole clean. Spot sand on plug + plug to TA
Devonian. Log. Perf as logs indicate. Spot 500 gals acid
swab.

See Attachment

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 R. D. Prite Title AREA ENGINEER Date 10-1-84

(This space for State Use)

ORIGINAL SIGNED BY JERRY WELTON

APPROVED BY DISTRICT 1 SUPERVISOR TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

OCT - 3 1984

RECEIVED

OCT - 2 1984

HOUSE OFFICE