

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 1980, Hobbs, NM 88240

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

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

API NO. (assigned by OCD on New Wells)

30-025-02768 02764

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 ☐

b. Type of Well:

OIL  
WELL ☐

GAS  
WELL ☐

OTHER RE-ENTER

SINGLE  
ZONE ☐

MULTIPLE  
ZONE ☐

7. Lease Name or Unit Agreement Name

HULDA A. TOWNSEND

2. Name of Operator

JFG ENTERPRISE

8. Well No.

5

3. Address of Operator

P.O. BOX 100, ARTESIA, NEW MEXICO 88210

9. Pool name or Wildcat Permo Upper  
TOWNSEND W.C. Penn

4. Well Location

Unit Letter D : 660 Feet From The NORTH Line and 660 Feet From The EAST Line

Section 9 Township 16S Range 35E NMPM LEA County

10. Proposed Depth

10574

11. Formation

WOLFCAMP

12. Rotary or C.T.

REVERSE RIG

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

4037.5 DF

14. Kind & Status Plug. Bond

15. Drilling Contractor

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
	10-3/4"		426'		CIRC
	7-5/8"		4576'		CIRC
	5-1/2"		10575'		4410'

WELL WAS PLUGGED JUNE 1969.

5-1/2" CASING PULLED @ 2500'

PLAN TO RE-ENTER WELL. DRILL OUT CEMENT PLUGS TO ORIGINAL PERFORATIONS @ 10386' TO 10448'.

DRESS OFF TOP AT 5-1/2" CASING.

RUN TUBING WITH PACKER. TEST TO SEE IF WELL IS COMMERCIAL. IF SO, PUT WELL ON PUMPING STATUS.

OPER. LOG ID NO. 011830

PROPERTY NO. 14453

POOL CODE 59847

EFF. DATE 4-25-94

API NO. 30-025-02764

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 J. T. Jackson TITLE PARTNER DATE 4-15-94

TYPE OR PRINT NAME J. T. JACKSON TELEPHONE NO. 746-9680

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE DISTRICT I SUPERVISOR DATE APR 27 1994

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

APR 22 1994

OFFICE