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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. K5479
7. Unit Agreement Name -
8. Farm or Lease Name Saunders "B"
9. Well No. 1
10. Field and Pool or Wildcat Undesignated - oil
12. County Lea
19. Proposed Depth 11,500'
19A. Formation Cisco Canyon
20. Rotary or C.T. Rotary
21. Elevations (Show whether DF, RT, etc.) later
21A. Kind & Status Plug. Bond blanket
21B. Drilling Contractor later
22. Approx. Date Work will start 12-23-68

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>
b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>
2. Name of Operator Phillips Petroleum Company
3. Address of Operator Room B-2, Phillips Bldg., Odessa, Texas 79760
4. Location of Well UNIT LETTER P LOCATED 660 FEET FROM THE south LINE AND 660 FEET FROM THE east LINE OF SEC. 17 TWP. 15-S RGE. 34-E NMPM
19. Proposed Depth 11,500'
19A. Formation Cisco Canyon
20. Rotary or C.T. Rotary
21. Elevations (Show whether DF, RT, etc.) later
21A. Kind & Status Plug. Bond blanket
21B. Drilling Contractor later
22. Approx. Date Work will start 12-23-68

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"	48#	400'	500	circ
11"	8 5/8"	32#, 24#	5700'	Suff to cover	all prod zones,
7 7/8"	5 1/2"	17#, 15.5#	11,500'	Suff to cover	all prod zones

Drill with fresh water, additives as required for control.
Series 900, hydraulically operated BOP series.

13 3/4

3-19-69

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 W. J. Mueller Title Associate Reservoir Engineer Date 12-17-68

(This space for State Use)

APPROVED BY [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: