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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.
B-2516

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work	7. Unit Agreement Name
b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>	8. Farm or Lease Name
2. Name of Operator	9. Well No.
Tamarack Petroleum Company, Inc.	1
3. Address of Operator	1b. Field and Pool or Wildcat
910 Building of the Southwest, Midland, Texas 79701	Maljamar
4. Location of Well UNIT LETTER D LOCATED 990 FEET FROM THE North LINE AND 790 FEET FROM THE West LINE OF SEC. 10 TWP. 17S RGE. 33E NMPM	12. County
	Lea
19. Proposed Depth	19A. Formation
4600	Grayburg
20. Rotary or C.T.	
Rotary	
21. Elevations (Show whether DF, RT, etc.)	21A. Kind & Status Plug. Bond
4156 Ground	Blanket
21B. Drilling Contractor	22. Approx. Date Work will start
	March 15, 1970

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
11	8 5/8	24	350	250	Circulated
7 7/8	4 1/2	10.5	4600	250	3100

1. Drill 11" hole to 350'.
2. Run 8 5/8" csg. to 350'. and cmt. w/250 sx. WOC 18 hrs.
3. Test csg. to 1000#.
4. Drill to TD 4600'. Run EL at TD.
5. Run 4 1/2" csg. and cmt. w/250 sx. WOC 24 hrs.
6. Test csg. to 2000#.
7. Perf. and test as indicated by logs.

8 5/8"

6/7/70

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 Robert M. Matney Title Vice President Date 3-6-70

(This space for State Use)

APPROVED BY Leslie A. Clements TITLE Oil & Gas Inspector DATE 3-6-70

CONDITIONS OF APPROVAL, IF ANY: