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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

5A. Indicate Type of Lease
STATE [XX]   FEE [ ]

5. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work

DRILL [X]   DEEPEN [ ]   PLUG BACK [ ]

b. Type of Well

OIL WELL [ ]   GAS WELL [X]   OTHER   SINGLE ZONE [ ]   MULTIPLE ZONE [ ]

2. Name of Operator

GREAT WESTERN DRILLING COMPANY

3. Address of Operator

P. O. BOX 1659   MIDLAND TX 79701

4. Location of Well UNIT LETTER K   LOCATED 2030 FEET FROM THE SOUTH LINE

AND 1980 FEET FROM THE WEST LINE OF SEC. 18 TWP. 16-S RGE 34-E NMPM

7. Unit Agreement Name

8. Farm or Lease Name
STATE "18"

9. Well No.
3-1

10. Field and Pool, or Wildcat
WILDCAT

12. County
LEA

19. Proposed Depth	19A. Formation	20. Rotary or C.T.
12,700'	MORROW	ROTARY

21. Elevations (Show whether DF, RT, etc.)
GL 4144.7'

21A. Kind & Status Plug. Bond
BLANKET

21B. Drilling Contractor
BIG WEST DRLG. CO.

22. Approx. Date Work will start
NOVEMBER 10, 1974

23. 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#	350'	400	Circulate
12¼" + 11½"	8 5/8"	24# + 32#	4,400'	400	3,057'
7 7/8"	4½"	11.6#	12,700'	525	9,653'

OBJECTIVE: Morrow Formation

LOGGING: Gamma ray-sonic and Induction Electric from base of intermediate to Total Depth.

MUD PROGRAM: Brine water to 4400'. Fresh water 4400' to 10,000'. Brine and polymer 10,000' to total depth.

BLOWOUT PREVENTER: 10" Cameron series 900 with blank and pipe rams and remote hydraulic controls. To be tested every 24 hours

APPROVAL VALID FOR 90 DAYS UNLESS DRILLING COMMENCED,

EXPIRES 1-17-75

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 _____ Title Asst. Chief Engineer Date 10-14-74

(This space for State Use)

SUPERVISOR DISTRICT I

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: