

30-025-26618

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LAND OFFICE	
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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.	
B-9380	

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> 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"/>		8. Firm or Lease Name	
c. Name of Operator		9. Well No.	
Moranco		1	
d. Address of Operator		10. Field and Pool, or Wildcat	
c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, N M 88240		Wildcat	
4. Location of Well		12. County	
UNIT LETTER L LOCATED 1980 FEET FROM THE South LINE		Lea	
AND 660 FEET FROM THE West LINE OF SEC. 15 TWP. 15S RGE. 32E NMPM			
19. Proposed Depth		19A. Formation	
10,400		Penn	
21. Kind & Status Plug. Bond		22. Rotary or C.T.	
Blanket		Rotary	
21B. Drilling Contractor		22. Approx. Date Work will start	
Moranco		Upon Approval	

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#	450	350	Circ.
11	8 5/8	24# & 32#	4100	1500	Circ.
7 7/8	5 1/2	15.5# & 17#	10,400	200	9250

Blowout preventors to be adequate for depth and area.

Completion to be conventional perforation & treatment.

Acreage is dedicated to an existing gas contract.

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 Moranco Title Agent Date 12/28/79

(This space for State Use)

APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT 1 DATE FEB 7 1980

CONDITIONS OF APPROVAL, IF ANY: