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# NEW MEXICO OIL CONSERVATION COMMISSION

30-025-27033

Form C-101  
Revised 1-1-65

5A. Indicate Type of Lease	
STATE <input type="checkbox"/>	FEE <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

## APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

6a. Type of Work b. Type of Well c. Name of Operator d. Address of Operator e. Location of Well f. Proposed Depth g. Formation h. Rotary or C.T. i. Kind & Status Plug. Bond j. Drilling Contractor k. Approx. Date Work will start		7. Unit Agreement Name 8. Farm or Lease Name 9. Well No. 10. Field and Pool, or Wildcat 11. County 12. Proposed Depth 13. Formation 14. Rotary or C.T. 15. Kind & Status Plug. Bond 16. Drilling Contractor 17. Approx. Date Work will start	
DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/> Sun Oil Company P. O. Box 1861, Midland, TX 79702 UNIT LETTER 0 LOCATED 330 FEET FROM THE South LINE AND 2310 FEET FROM THE East LINE OF SEC. 6 TWP. 14 S RGE. 38 E NMPM 13000' Wildcat Rotary Blanket on File Verna Drilg. Co. 9-15-80		Maymie Lewis 1 Wildcat Lea Wildcat Rotary Blanket on File Verna Drilg. Co. 9-15-80	

## 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#	375	400	Circulate
11	8 5/8	24# & 32#	4700	800	1800
7 7/8	5 1/2	15.5# & 17#	12800	960	8000

## Blowout Prevention

Shaffer 13 5/8 - 5000 "LWS", Double Hydraulic with 4" Side openings.  
Shaffer 13 5/8 5000 Hydrill

\*\*\*Cement on the intermediate casing must be brought from the top of the salt or anhydrite to the surface casing by either circulating the casing with cement or by pulling the top of the salt.

FOR 90 DAYS UNLESS  
DRILLING COMMENCED,

EXPIRES 12/8/80

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 [Signature] Title Production Staff Assoc. Date 8-27-80

(This space for State Use)

APPROVED BY [Signature] TITLE Geologist DATE SEP 8 1980

CONDITIONS OF APPROVAL, IF ANY:

[Signature]

NEW MEXICO OIL CONSERVATION COMMISSION  
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102  
Supersedes C-128  
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

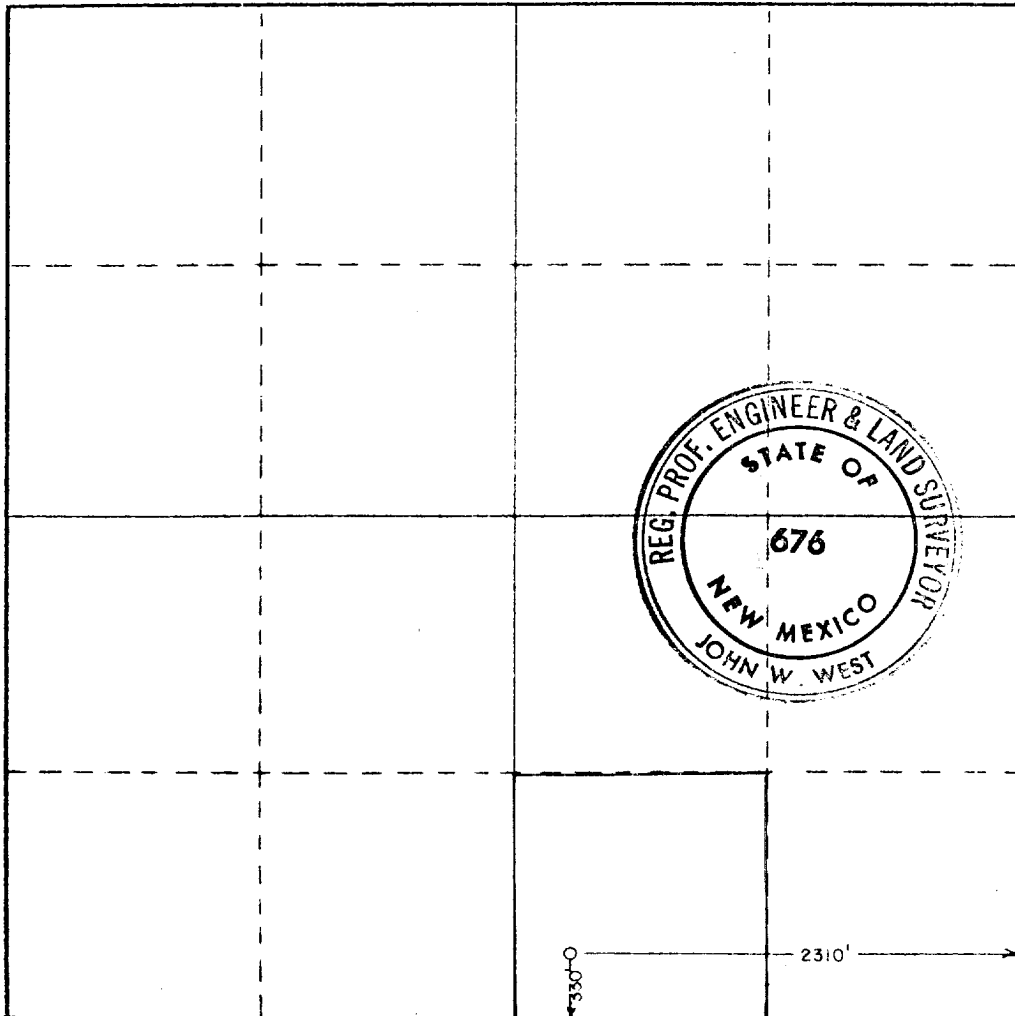
Operator <b>SUN OIL COMPANY</b>			Lease <b>MAYMIE LEWIS</b>			Well No. <b>1</b>		
Unit Letter <b>O</b>	Section <b>6</b>	Township <b>14 SOUTH</b>	Range <b>38 EAST</b>	County <b>LEA</b>				
Actual Footage Location of Well: <div style="display: flex; justify-content: space-between;"> <span><b>330</b> feet from the <b>SOUTH</b> line and</span> <span><b>2310</b> feet from the <b>EAST</b> line</span> </div>								
Ground Level Elev. <b>3816.4</b>	Producing Formation <i>W</i> <b>Wildcat</b>		Pool <b>Wildcat</b>			Dedicated Acreage: <b>40</b> Acres		

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes    ☐ No    If answer is "yes," type of consolidation \_\_\_\_\_

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



**CERTIFICATION**

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

*Doris Williams*  
Name

**DORIS WILLIAMS**

Position  
*Dr. Acctg Asst*  
Company

**SUN OIL COMPANY**

Date  
*September 3, 1980*

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed

**AUGUST 22, 1980**

Registered Professional Engineer and/or Land Surveyor

*John W. West*

Certificate No.	<b>JOHN W. WEST</b>	<b>676</b>
	<b>PATRICK A. ROMERO</b>	<b>6863</b>
	<b>Ronald J. Eidson</b>	<b>3239</b>

0 330 660 990 1320 1650 1980 2310 2640 2000 1500 1000 500 0

100-100 31003

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