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DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION Form C-101				
SANTA FE	I NEW MEXICO OIL CONSERVATION COMMISSION				
FILE	Revised 1-1-65 5A. Indicate Type of Lease				
U.S.G.S.					
LAND OFFICE					Gas Lease No.
OPERATOR				0G-4)	
				mm	inninnin in the second s
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK					
1a. Type of Work				7. Unit Agreen	nent Name
	DEEPEN				
b. Type of Well		PLU		8. Farm or Lea	use Name
	THER	SINGLE M	ZONE	Pennzo	i]
2. Name of Operator				9. Well No.	· · · · · · · · · · · · · · · · · · ·
Blanks Energy Corporation				3	
3. Address of Operator				10. Field and.	Pool of Wildon TCD
600 Blanks Building, Midland, TX 79701				NE Lov	ington Penn
4. Location of Well UNIT LETTERC	LOCATED 1830	FEET FROM THE WEST			
	orth 18		37-Е		
AND FEET FROM THE	LINE OF SEC.	16-S	NMPM		
				12. County	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1111111	Lea	
	<i>444444444444444444</i>				
		19. Proposed Depth 11600'	19A. Formation Strawn	2	0. Rotary or C.T. Rotary
21. Elevations (Show whether DF, RT, etc.)	21A. Kind & Status Plug. Bond	21B. Drilling Contractor		22. Approx. [Date Work will start
3851' GL	Multi-Well Bond	Cactus Drlg Corp-Rig 8			1 5, 1981
23. PROPOSED CASING AND CEMENT PROGRAM					

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
<u> </u>	13 3/8"	54.5#	375 '	400	Surface
	8.5/8"	24-32#	4300'	1400	Surface
7 7/8"	4 <u>1</u> "	11.6#	11600'	1225 '	6600'

Pressure Control Equipment: (1) Cameron Series 1500 Type F Double Hydraulic Blow-Out Preventer. (2) Schaffer Series 1500 Angular Blow-Out Preventer. (3) Closing Unit and Accumulators National Flanged Kill Line and Valves - Series 1500.

Note: This is being filed to amend the location and drilling contractor on a previously approved Form 101.

APPROVAL VALID FOR 180.	DAYS
APPROVAL VALID FOR 180 PERMIT EXPIRES UNLESS DRILLING UXDERV	81
UNLESS DRILLING UNDERV	VÁY

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUC-TIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

I hereby certify that the information above to true and Signki Steer Friend	i complete to the best of my knowledge and belief. TitleEngineer	Date 4-1-81
(This space for State Use)	TITLE SUPERVISOR DISTRIC	TI DATE APR 6 1881
CO. DITIONS OF APPROVAL, IF ANY:		VATE

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