no. of 1 S PECTIVED 1			_	30-02	25-27550		
DISTRIBUTION		MEXICO OIL CORSE	RVATION COMMISSION		Form C-101		
SANTA FE	·				e Type of Lease		
u.s.g.s.				STATE			
LAND OFFICE					& Gas Lease No.		
OPERATOR				LG	- 1371		
ADDI ICATION	FOR DEBUT TO	DRILL DEEDEN	OD DELIC DACK				
APPLICATION 1a. Type of Work	FUR PERMIT TO	DRILL, DEEPEN,	UR PLUG BACK	7. Unit Agr	eement Name		
<u></u>							
DRILL X		DEEPEN	PLUG E	BACK 8. Form or 1	Lease Name		
OIL GAS WELL W	OTHER		SINGLE MUL	zone State	"LQ" Gas Com.		
2. Name of Operator				9. Well No.			
Hillin Pro	oduction Compa	iny			#1		
3. Address of Operator					10. Field and Pool, of Wildcat		
	152, Odessa, 1		· · · · · · · · · · · · · · · · · · ·	Townse	nd-Morrow		
4. Location of Well UNIT LETTER_	LOC	ATED 660'	FEET FROM THE South	LINE (
1000	11 	F	160 0				
and 1980 feet from th	E West Lin	E OF SEC. 5	WP. 168 RGE. 3	5E NMPM 12. County	<i>m)HHHH</i>		
				Lea			
	HHHHH	********	HHHHHH	riinHHH	Willith firm		
		HHHHHH)	19. Proposed Depth 1	9A. Formation	20. Rotary or C.T.		
			13,500'	Mississippian	Rotary		
21. Elevations (Show whether DF, R)	T, etc.) 21A. Kind	& Status Plug. Bond	21B. Drilling Contractor	l	k. Date Work will start		
4490.5 G	.L. B1	anket	Hillin Drilling	Company Ju	ly 1, 1982		
23.	P	ROPOSED CASING AND	CEMENT PROGRAM				
SIZE OF HOLE S	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP		
17"	13 3/8"	60#	Approx. 400	250 "C"-4% Ge1			
	13 3/0	3011	I I I I I I I I I I I I I I I I I I I	2% CC	012001000 00 0012		
12 1/4" - 11"	8 5/8"	24 & 32#	Approx. 4900	200 sx.	4000'		
7 7/8"	5 1/2"	17 & 20#	Approx. 13,50	As needed :	for completion		
•	-		, .				
B.O.P. Equipment:			ntors w/pressure	controlled clos	sing unit-		
	Hydril and c	hoke manifold.					
M 1 D	0 1 1 .	3 111 - 1 - 1					
Mud Program:	•		surface casing,				
	_		l intermediate h asing. Fresh wa		_		
		ud program to '	_	rei to approxima	ately 3000,		
	104 201143 11	dd program to	10.				
**	*Cement on th	e intermediate	casing must be I	orought from the	top of		
			ne surface casing				
			it the top of the				
	•		·				
N ABOVE SPACE DESCRIBE PROP IVE ZONE, GIVE BLOWOUT PREVENTER I	POSED PROGRAM: IF F PROGRAM, IF ANY.	ROPOSAL IS TO DEEPEN O	R PLUG BACK, GIVE DATA ON	PRESENT PRODUCTIVE ZONE	AND PROPOSED NEW PRODUC-		
hereby certify that the information a	bove is true and comp	lete to the best of my k	nowledge and belief.				
. 19241 2 th	Whins .	Produc	ction Secretary	D	June 2, 1982		
igned 1 A 1 C C 7 J	in Heal	1416		Date			
(This space for State ORIG	SINAL SIGNED BY						
PPROVED BY	ERRY SEXTON	TITLE	•	DATE			
ONDITIONS OF APPROVAL, IF AN	UAIL	- I da DAVC					
SHOTTIONS OF REPROVAL, IF AN			_	DODOVAL MALID EOS	2 / X// UATS		
		EE AROVE	A	PPROVAL VALID FOR	12/0/02		
		EE ABOVE	A	PPROVAL VALID FOR PERMIT EXPIRES _ UNLESS DRILLING	12/9/02		

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

		All distanc	es must be from t	ne outer boundaries of	the Section	1.				
Hillin Production Co. Legge State "LQ" Gas Com. Well No.										
Unit Letter	Section	Township	2/6	Ronge	County					
V	5	<u> </u>	16S	35E	<u> </u>	Lea				
Actual Footage Loc 660	feet from the	South	line and	1980 _{feet}	t from the	West	line			
Ground Level Elev.	Producing For	mation	Pool		des	† Dedic	ated Acreage:			
4490.5 Mississippian Townsend Morrow 320 Acres										
1. Outline th	e acreage dedica	ted to the a	subject well b	y colored pencil o	r hachure	marks on the pla	t 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).										
					have the	interests of all o	wners been consoli-			
	dated by communitization, unitization, force-pooling.etc? Communitization Pending									
X Yes	No If a	sswer is "ye	s," type of con	solidation	mmunitt.	racion rendi				
		owners and	tract description	ons which have ac	tually be	en consolidated. (Use reverse side of			
	necessary.)	<u> </u>								
							zation, unitization, eved by the Commis-			
sion.	ing, a otherwise,	Or diffin a ne		r, enminaring suci	i interes	is, nas been appro	oved by the Commis-			
						CERT	TIFICATION			
	i			į	l	CER	ITTICATION			
	1				-	I hereby certify t	that the information con-			
1	1				1	1	true and complete to the			
				i		best of my knowl	edge and belief.			
	ł			1		Bererli	Durkens			
	·- +	+		-		Norme Beverly H	Hawkins			
	1			1	l	Position Production	on Secretary			
	i) }		Сотрапу	(
	į			1			roduction Co.			
	i			.	1	June 2, 1	L982			
	1									
			-				also also the st			
	i	320 A RI	<u>ES</u>			1	that the well location at was plotted from field			
	İ					1	surveys mode by me or			
	!		WEA	KING	H	under my supervi	sion, end that the same			
	į			1/2		1 -	ect to the best of my			
	ï 1					knowledge and be	lief.			
	- 					May 2	0, 1982			
H	i		MOCO E	NS interes	H	Date Surveyed	,			
198			1916	July sura	il il					
	RODGUTION COM			AMOCO		Registered Professi and/or Land Surveyo	*			
STATE OF LG-1371-	N.N. 9	28	STATE OF N.1 LG-6562-80 A			1 1 1				
20 13/1			0302-00 2	JO ACKES		West D.	R.L.S.			
		1		F	шт.	Certificone No.	. 1			
0 330 660 19	0 1320 1660 1980	2310 2640	2000 1	1000 1 000	0		6541			

