DISTRIBUTION SANTA FE		NEW MEXICO OIL CON		Form C-101 Revised 1-1-55	
FILE					
U.S.G.S.				STATE	ate Type of Lease
LAND OFFICE	 - - 			<u>i</u>	Il & Gas Lease No.
OPERATOR				.s. sidle C	it & Gas Lease No.
APPLICAT	TON FOR PERMI	T TO DRILL, DEEPEN	I, OR PLUG BACK		
la. Type of Work				7. Unit Ac	reement Name
b. Type of Well DRILL	$\overline{\mathbf{x}}$	DEEPEN	PLU	G BACK	
L	\neg			9. Farm or	Lease Name
WELL GAS WELL 2. Name of Operator	0.HER -		STUGLE M	ZONE W. W	. Hamilton
				9. Well No	
AMERADA HES 3. Address of Operator	S CORPORATION	·		2	
•				10. Field	and Pool, or Wildcat
DRILLING SERIVCES 4. Location of Well	P. O. Box 21	040, TULSA OKLAHO	MA 74102	Knowle	s Devonian
UNIT LE	TTER L	LOCATED 1520	FEET FROM THE South	LINE	
480 t	Wost	25	160 2		
TTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTT	West	35	16S AGE.	8E NAIDM	777777777777
				12. County	
+++++++++++++++++++++++++++++++++++++++	444444	/////////////////////////////////////	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Lea	
/////////////////////////////////////	HHHHH	/////////////////////////////////////	1). Froposed Depth		
				19A. Formation	20. Rotary or C.T.
1. Elevations (Show whether L	DF. RT. etc.) 21A	Kind & Status Plug. Bond	12,220 218. Crilling Contractor	Devonian	Rotary
3699.0		Blanket on File	Unknown	22. Appro	x. Date Work will start - June 7
3.		PROPOSED CASING AN	ND CEMENT PROGRAM		
SIZE OF HOLE	1 01 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			· · · · · · · · · · · · · · · · · · ·	
17½"	SIZE OF CASI				EST. TOP
11"	13-3/8	48	400	425	Circulate
7-7/8"	8-5/8	24, 28, & 32	5000'	1700	Circulate
7-770	5 ¹ 2''	17	12,203	900	8000'
			•	•	'
			•		
		·			
	,			•	
		•		,	
		•			
	•				
				Menths From Ap	proval
			Permit Explies 5	y will male to the tre	F · · ·
			Date Unless Dri	ang Underway.	
ABOVE SPACE DESCRIBE P	ROPOSED PROGRAM	: IF PROPOSAL IS TO DEEPEN :	TH PLUG BACK, GIVE DATA O	 N PRESENT PRODUCTIVE ZONF	
	TER PROGRAM, IF ANY.				FROEVISED NEW PRODU
reby certify that the informat	ion above is true and	complete to the best of my k	nywledge and bellef.	- 	
red R. Ellen T	P Wilson	TulSuperviso	m Dmla Admid a		3 05
The state of the s	A. WIISON	iuie_Superviso	r Drig Admin Se	rvices Pare5-8	8-85

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CONDITIONS OF APPROVAL, IF ANY:

ORIGINAL SIGNED BY MERRY TEXTON

DISTRICT | SUPERVISOR TITLE

36-225-34274

.ATE JUN 1 4 1985

NIN 13 1085

x.