

30-025-29451

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NEW MEXICO OIL CONSERVATION COMMISSION

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

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name Reed	
2. Name of Operator Union Oil Company of California		9. Well No. 2	
3. Address of Operator P. O. Box 671 Midland, Texas 79702		10. Field and Pool, or Wildcat Morton Wolfcamp	
4. Location of Well UNIT LETTER K LOCATED 1870 FEET FROM THE South LINE AND 2080 FEET FROM THE West LINE OF SEC. 12 TWP. 15 S RGE. 34 E NMPM		12. County Lea	
19. Proposed Depth 10,550'		19A. Formation Wolfcamp	
20. Rotary or C.T. Rotary		21. Elevations (Show whether DF, RT, etc.) 4063' GR	
21A. Kind & Status Plug. Bond		21B. Drilling Contractor N/A	
22. Approx. Date Work will start Upon Approval			

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#	400'	450	Surface
11"	8-5/8"	24 & 32#	4700'	1600	Tie Back
7-7/8"	5-1/2"	17#	10550'	1030	

13-5/8" 3000# BOP 0' - 4700'
11" 3000# BOP 4700' - TD

Permit Expires 6 Months From Approval
Date Unless Drilling Underway.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE IN A ON EXISTENT 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 J.R. Hughes Title Dist. Dir. Supt. Date 10-3-85

(The space for State Use)
Eddie W. Seay
Oil & Gas Inspector
APPROVED BY _____ TITLE _____ DATE OCT 15 1985
CONDITIONS OF APPROVAL, IF ANY