

Submit to Appropriate
District Office
State Lease -- 6 copies
Fee Lease -- 5 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

API NO. (assigned by OCD on New Wells)
30-025-2992

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.
Fee

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL ☐ RE-ENTER ☐ DEEPEN ☐ PLUG BACK ☒

b. Type of Well:

OIL WELL ☒ GAS WELL ☐ OTHER ☐

SINGLE ZONE ☐ MULTIPLE ZONE ☐

7. Lease Name or Unit Agreement Name

Shipp "34"

8. Well No.

4

9. Pool name or Wildcat

Casey (Strawn) *wildcat San Andres*

4. Well Location

Unit Letter N : 1980 Feet From The West Line and 660 Feet From The South Line

Section 34 Township 16 S Range 37 E NMPM Lea County

10. Proposed Depth

5159'-5196

11. Formation

San Andres

12. Rotary or C.T.

Rotary/E.L.

13. Elevations (Show whether DF, RT, GR, etc.)

3772'

14. Kind & Status Plug. Bond

Surety/7500'

15. Drilling Contractor

Unknown

16. Approx. Date Work will start

8-01-92

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP

Abandon Strawn with CIBP set at 8260 w/35/ of cmt. and perf San Andres 5159-5196

WORKOVER PROCEDURE ATTACHED

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 *J. L. Gaines*
TYPE OR PRINT NAME J. L. GAINES

TITLE ENGINEER

DATE 7/14/92

512-

TELEPHONE NO. 882-9966

(This space for State Use)
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

JUL 17 '92

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: