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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 DRILL <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> Re-Enter <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name Scharbauer	
2. Name of Operator W. G. Harrington		9. Well No. 2	
3. Address of Operator 1314 Union Tower Building, Dallas, Texas		10. Field and Pool, or Wildcat B. K. Scharbauer	
4. Location of Well UNIT LETTER <u>L</u> LOCATED <u>2090</u> FEET FROM THE <u>SOUTH</u> LINE <u>320</u> FEET FROM THE <u>West</u> LINE OF SEC. <u>20</u> TWP. <u>1</u> RGE. <u>34N</u> NMPM			
		12. County Lea	
		19. Proposed Depth 5110'	
		19A. Formation Queen	
		20. Rotary or C.T. Rotary	
21. Elevations (Show whether DE, RT, etc.) 3065' GL		21A. Kind & Status Plug. Bond Blanket	
		21B. Drilling Contractor M. G. Davis	
		22. Approx. Date Work will start Jan. 22, 1969	

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
11	3 5/8	23.7	150	150	Circulated
7 7/8	5 1/2	15.5#	150	150	3000'

Plan to re-enter this plugged well. Will clean out to 1000', test and log and if favorable plan to run 5 1/2" casing and complete.

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.

Signed Harold C. Curry Title Agent Date Jan. 15, 1969

(This space for State Use)

APPROVED BY John W. Runyan TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: