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LAND OFFICE	
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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		8. Name or Lease Name	
DRILL <input type="checkbox"/>	DEEPEN <input type="checkbox"/>	Hobbs East San	
OIL WELL <input type="checkbox"/>	GAS WELL <input type="checkbox"/>	Andres SWD	
OTHER Salt Water Disposal <input type="checkbox"/>	SINGLE <input type="checkbox"/>	9. Well No.	
2. Name of Operator		F-30	
Rice Engineering & Operating, Inc.		10. Field and Pool, or Wildcat	
3. Address of Operator		Hobbs East San Andres	
P. O. Box 1142, Hobbs, New Mexico 88240		12. County	
4. Location of Well		Lea	
UNIT LETTER F	LOCATED 2310	19. Proposed Depth	
FEET FROM THE west	LINE	19A. Formation	
AND 1940	FEET FROM THE north	San Andres	
LINE OF SEC. 10	TWP. 18S	Clorieta	
RGE. 39E	NMPM	20. Rotary or C.T.	
21. Elevations (Show whether DF, RT, etc.)		22. Approx. Date Work will start	
3015' DF	21A. Kind & Status Plug. Bond	As soon as possible	
Current	21B. Drilling Contractor		
	D.A.		

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
	8-5/8"		1883'	900	Circ. #
	5 1/2"		4464'	1200	Circ. #
	4"		4317' to 6480'	120	5200' L.L.

Formerly Humble Oil & Refining Company S. I. Cain #1
 *Casing run and cemented by Humble Oil & Refining Company
 Recomplete for salt water injection well in the following perms. 5245-62' and
 5980-6054'
 2" CEMENTED tubing to be set @ 5225'

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.

ORIGINAL SIGNED BY
 Signed L. B. GOODHEART Title Division Manager Date 11-20-68
L. B. Goodheart
 (This space for State Use)

APPROVED BY [Signature] TITLE DATE
 CONDITIONS OF APPROVAL, IF ANY: