

NEW MEXICO OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

Form G-101
Revised (12/1/55)

NOTICE OF INTENTION TO DRILL

Notice must be given to the District Office of the Oil Conservation Commission and approval obtained before drilling or recompletion begins. If changes in the proposed plan are considered advisable, a copy of this notice showing such changes will be returned to the sender. Submit this notice in QUINTUPLICATE. One copy will be returned following approval. See additional instructions in Rules and Regulations of the Commission. If State Land submit 6 Copies Attach Form G-128 in triplicate to first 3 copies of form G-101

Box 1094, Midland, Texas

July 12, 1963

(Place)

(Date)

OIL CONSERVATION COMMISSION
SANTA FE, NEW MEXICO

Gentlemen:

You are hereby notified that it is our intention to commence the Drilling of a well to be known as
WM. G. ROSS

(Company or Operator)

Carper Drlg. Co.

#1

B

The well is

(Lease)

(Unit)

located 660 feet from the South line and 1980 feet from the West line of Section 3, T. 18 South, R. 33 East, NMPM. Wildcat Lea County

(GIVE LOCATION FROM SECTION LINE)

If State Land the Oil and Gas Lease is No.

If patented land the owner is Fee

Address

We propose to drill well with drilling equipment as follows:

Rotary tools from surface to total depth

The status of plugging bond is Blanket bond with American Employer's Insurance Co., through J. W. Daniels Insurance Co., Hobbs, New Mexico.

Drilling Contractor unknown

We intend to complete this well in the Wolfcamp formation formation at an approximate depth of 10,500 feet.

CASING PROGRAM

We propose to use the following strings of Casing and to cement them as indicated:

Size of Hole	Size of Casing	Weight per Foot	New or Second Hand	Depth	Sacks Cement
17 1/2"	13-3/8"	27.06# API-50	new	Approx. 300'	Approx. 350
12 1/4"	9-5/8"	36# J-55	new	Approx. 3400'	sufficient *
8-3/4"	7"	26# N-80	new	Approx. 10,500'	sufficient **

If changes in the above plans become advisable we will notify you immediately.

ADDITIONAL INFORMATION (If recompletion give full details of proposed plan of work.)

Approved _____, 19____
Except as follows:

* Tie back to salt
** Cover all possible prod. pays

OIL CONSERVATION COMMISSION

By

Sincerely yours,

Wm G Ross
(Company or Operator)

By

Position OWNER

Send Communications regarding well to

Name WM. G. ROSS

Address BOX 1094, Midland, Texas