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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-4-65

AUG 25 11 11 AM '65

5A. Indicate Type of Lease	
STATE <input checked="" type="checkbox"/>	FEE <input type="checkbox"/>
Oil & Gas Lease No. 85310	

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name State CB	
2. Name of Operator Cities Service Oil Co.		9. Well No. 2	
3. Address of Operator Box 69 - Hobbs, New Mexico		10. Field and Pool, or Wildcat Corbin Abo	
4. Location of Well UNIT LETTER G LOCATED 2310' FEET FROM THE North LINE AND 1700 FEET FROM THE East LINE OF SEC. 32 TWP. 17S RGE. 33E NMPM		12. County Lea	
21. Elevations (Show whether DF, RT, etc.) Est. 4030'		19. Proposed Depth 8900'	19A. Formation Abo
21A. Kind & Status Plug. Bond Blanket-Approved	21B. Drilling Contractor Contract not let	20. Rotary or C.T. Rotary	
22. Approx. Date Work will start Aug. 28, 1965			

23. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17"	13 3/8"		400'	400	Circulate
11"	8 5/8"	24#	2800'	300	1600'
7 7/8"	5 1/2"	15.5 & 17#	8900'	300	7100' /

APPROVED FOR 90 DAYS FROM
DRILLING COMMENCED
EXPIRES

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 E. J. Field Title District Supt. Date 8-24-65
(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

X Cement must tie back
info _____ casing

**NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT**

Form O-102
Supersedes O-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

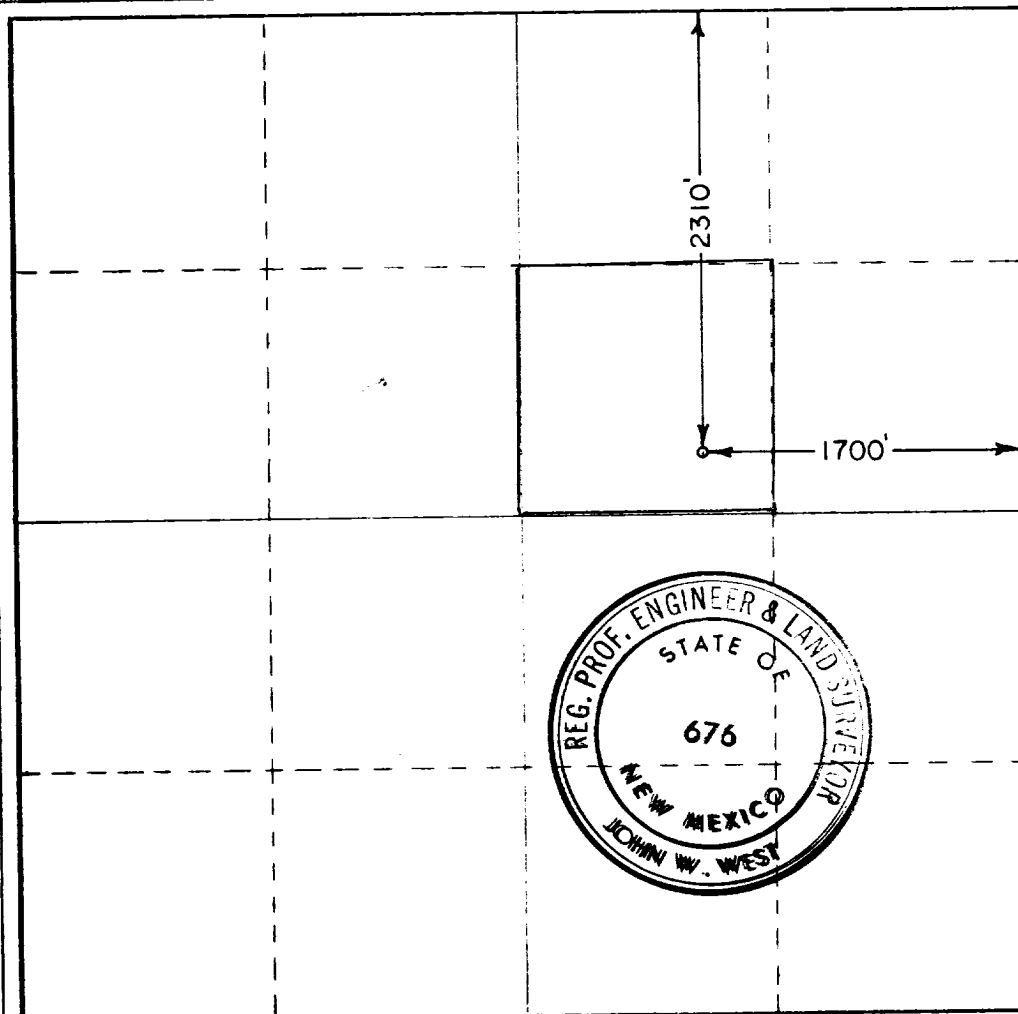
Operator CITIES SERVICE OIL CO.			Lease STATE "CB"		Well No. 2
Unit Letter G	Section 32	Township 17 SOUTH	Range 33 EAST	County LEA	
Actual Footage Location of Well: 2310 feet from the NORTH line and 1700 feet from the EAST line.					
Ground Level Elev. Est. 4430	Producing Formation Alto		Pool Corbin Abo		Dedicated Acreage 40

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name *Elfrida*
 Position _____
~~District Superintendent~~
 Company _____
~~Cities Service Oil Co.~~
 Date **8-21-65**

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed: **AUGUST 21, 1965**
 Registered Professional Engineer and/or Land Surveyor

John W West
 Certificate No. **676**

