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NEW MEXICO OIL CONSERVATION COMMISSION

OFFICE O. C. C.
JUN 30 10 59 AM '67

Form C-101
SA. Permit Type of Permit
STATE
Permit No. & Date Issued
3-1520

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well OIL WELL ☒ GAS WELL ☐ OTHER ☐		8. Name of Lessee (Name)	
2. Name of Operator Mobil Oil Corporation		8. Well No. 121	
3. Address of Operator P. O. Box 633 - Midland, Texas 79701		10. Field and Pool, or Tract	
4. Location of Well UNIT LETTER L LOCATED 1830 FEET FROM THE South LINE AND 760 FEET FROM THE West LINE OF S. G. 13 T. 17S R. 34E N. 17W		12. County Lea	
11. Proposed Depth 10,500'		19A. Formation Wolfcamp & U. Penn	
21. Elevations (Show whether DF, RT, etc.) 4,017 GR		20. Rotary or C.R. Rotary	
21A. Kind & Status Plug, Bond On File		22. Approx. Date Work will start	

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17-1/2"	13-3/8"	48#	350'	Circulate	Surface
12-1/4"	9-5/8"	36# & 40#	5,000'	Circulate	Tie-in w/ Surf. Csg
8-3/4"	7" (Liner)	23#	10,500'	Circulate	Tie cement in w/ Intermediate Csg. 4800' to TD.

MUD PROGRAM

0' - 350'	Spud Mud
350' - 5,000'	Brine and Oil
5,000' - 8,000'	Fresh Water
8,000' - TD	Low Solids Fresh Water Mud

Wt. 8.7-9.4, Vis. 35-45, pH +9, WL 15.

LOGGING PROGRAM

Gamma Ray-Cal-SNP	5,000' - 10,500'
Dual Induction Laterolog	5,000' - 10,500'
BHC-Sonic	5,000' - 10,500'
PDC-(GR-Collar)	5,800' - 10,500'

NOTE: This supersedes Form C-101 dated April 21, 1967, to show amended location. Location moved 50' South because of a power line.

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 B. J. Tibbets Title Operations Engineer Date June 29, 1967
(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: