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# NEW MEXICO OIL CONSERVATION COMMISSION

30-02-1  
Form C-101  
Revised 1-1-65

5A. Indicate Type of Lease	
STATE <input type="checkbox"/>	FEE <input 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"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name	
2. Name of Operator		9. Well No.	
3. Address of Operator		10. Field and Pool or Wildcat	
4. Location of Well UNIT LETTER <u>A</u> LOCATED <u>370</u> FEET FROM THE <u>North</u> LINE AND <u>330</u> FEET FROM THE <u>LINE OF SEC.</u> TWP. <u>19 S</u> RGE. <u>32 E</u> NMPM		12. County	
21. Elevations (Show whether DF, RT, etc.)		19. Proposed Depth	19A. Formation
21A. Kind & Status Plug. Bond		21B. Drilling Contractor	22. Approx. Date work will start
23. <u>CR 3331</u>		<u>at once</u>	

### PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
11	8 5/8	20.7	330	* 330	3001 to circulate
7 7/8	6 1/2	9.5	5050	** 760	1301 to 2600

\* 130 ex. TLM w/1/4 floccle and 12 mesh followed by 200 ex. cl. C w/12 mesh (3001 to circulate)

\*\* 460 ex TLM w/3/4 per ex glauconite and 1/4 per ex floccle followed by 100 ex of cl. "C" w/10% of salt per ex (1301 to 2600)

### Completion Program

1. perf. w/2 japt. 2. Treat w/1000 gal. of mud acid 3. Frac w/25,000 gal of lease oil w/fluid loss additives.

### Formation Type Expected

Tatas 2568'  
Capitan Reef 2938'  
Dela. Ft. Group 4192'

APPROVAL VALID  
FOR 90 DAYS UNLESS  
DRILLING COMMENCED,

11. Pay Sand 4635'  
12. Pay Sand 4777'  
Total Depth 5050'

EXPIRES 5-10-71

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 J. J. Velten Title Division Civil Engineer Date 2/8/71

(This Space for State Use)

APPROVED BY [Signature] TITLE [Signature] DATE 2/8/71

CONDITIONS OF APPROVAL, IF ANY:

THE COMMISSION MUST BE NOTIFIED  
24 HOURS PRIOR TO RUNNING  
CASING.