DISTRIBUTION SANTA FE FILE U.S.G.S. LAND OFFICE OPERATOR		MEXICO OIL CONSER			STATE [	Type of Lease  X FEE  6 Gas Lease No.	
APPLICATION	FOR PERMIT TO	DRILL, DEEPEN, C	OR PLUG BACK		7. Unit Agre	ement Name	
DRILL X		DEEPEN	PLUCE	BACK	Com.		
b. Type of Well		-			8. Farm or Lease Name State-Com.		
OIL X GAS WELL 2. Name of Operator	OVRER		SINGLE MUL ZONE MUL	ZONE	9. Well No.	-com.	
K. K.	Amini					2	
	<del> </del>	idland, Texas 7			10. Field an	acuum Abo	
4. Location of Well UNIT LETTE	R J LOC	ATEO 1980 FE		2			
AND 1980 FEET FROM	THE East LIN	IE OF SEC. 2	VP. 17S RGE. 341	NMPM			
					12. County		
HHHHHH					Lea	HHHH	
			· · · ·	9A. Formation		20. Rotary or C.T.	
21. Elevations (Show whether DF,	RT, etc.) 21A. Kind	& Status Plug. Bond 21	9,000'	Vacuum .		Rotary . Date Work will start - "	
4045.1' G.L.	Blar	ıket K	(KA Drilling Co	mpany		/10/75	
23.	F	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"	28# 2,000'		400 sks.		Circulate	
7-7/8"	4-1/2"	11.60 & 10.50#	9,000'	300 sks. 7,00		7,000'	
1		!		1	1.	l	
IN ABOVE SPACE DESCRIBE PR		APPROVAL V FOR 90 DAYS DRILLING COMM EXPIRES FOR 15 TO DEEPEN OF	UNLESS COMMENCED, SS	AND SAVO	00 101 00 101 00 101	E AND PROPOSED NEW PRODU	
TIVE ZONE. GIVE BLOWOUT PREVENTS	ER PROGRAM, IF ANY.						
I hereby certify that the information	Supplier is true and com				DateJ	une 2, 1975	
(This space for S	V. Alleyan	TITLE	gaologial		DATE	s. 4 - 1 - 4 - 4 - 1	

~ 1			1.5		
IGNED	FITLE	Comptroller		ne 2 <b>, 1</b> 975	
8. I hereby certify that the informatio	n above is true and complete to the best	t of my knowledge and belief.			
	.D. 10" Double Shaffer		s. Hydrauli	c closing ι	
·	owout equipment - surfac	e hole			
Proposed Blowout E	Equipment				
,					
. Describe Proposed or Completed O work) SEE RULE 1103.	perations (Clearly state all pertinent de	tails, and give pertinent dates, including	ng estimated date of	starting any prope	
отнея		OTHER			
MPORARILY ABANDON	CHANGE PLANS	CASING TEST AND CEMENT JOB	PLUG /	AND ABANDONMENT	
ERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTER	ING CASING	
Check	Appropriate Box To Indicate Intervious To:		ther Data IT REPORT OF:		
	4045.1' (	a.L.	Lea		
THE LUSC LINE, SECTI	2 TOWNSHIP 17S		12. County		
	<u> </u>				
Location of Well	10. Field and Pool, or Wildcat  North Vacuum Abo				
Address of Operator 204 Gu	exas 79701	9. Well No. 2			
Name of Operator  K. K.	State-Com.				
OIL XX GAS WELL WELL		Com. 8. Farm or Lease Name			
SUNDF (DO NOT USE THIS FORM FOR PRI USE **APPLICAT	7. Unit Agreement Name				
	NA MOTICES AND DEPORTS OF	I WELL C	E-7	54 .\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
AND OFFICE PERATOR			State X 5. State Oil & Ga	Fee s Lease No.	
S.G.S.			5a. Indicate Type	of Lease	
DISTRIBUTION INTA FE	NEW MEXICO OIL CON	SERVATION COMMISSION	Supersedes Old C-102 and C-103 Effective 1-1-65		

3. If production is obtained a communitization agreement will be filed covering the N/2 of the SE/4.