30-025-29021

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DISTRIBUTION	NEW	MEXICO OIL CONSER	EVATION COMMISSION	N =	Form C+101		
SANTA FE				-	Perised 1-1-1	B\$	
FILE				_		Type of Lease	
U.S.G.S.					STATE		
LAND OFFICE				-	-	6 Gas Lease No.	
OPERATOR				ľ		1582	
				l l	$\dot{m}m$	mmmini	
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK							
la. Type of Work				<del></del>	7. Unit Agre	ement Name	
b. Type of Well DRILL X DEEPEN PLUG BACK							
b. Type of Well				BACK L	8. Farm or Lease Name		
OIL X GAS MULTIPLE ZONE X ZONE ZONE			TIPLE [	Arco State			
2. Name of Operator					9. Well No.		
Blanks Energy Corporation						2	
3. Address of Operator					10. Field and Pool, or Wildcat		
600 Blanks Building; Midland, Texas 79701				- 1	Vacuum, S. (Devonian)		
4. Location of Well Whit Letter 0 405 south				LINE	VIEW TICELLY THE THEFT		
1000					VILLE SOUND STATES III		
AND 1850 FEET FROM	THE East LI	NE OF SEC. 16 TW	P. 18-S RGE. 3	35-ENMPM			
		THIMINI			12. County	HHHH	
HHHHHH	MMM				Lea		
				711111	TĨĨTH	HHHHH	
HHHHHHH							
		111111111111111111111111111111111111	. Proposed Depth 1	9A. Formation	*****	20. Rotary or C.T.	
			12000'	Devonia	n l	Rotary	
21. Elevations (Show whether DF,		3	B. Drilling Contractor		22. Approx.	Date Work will start	
3910.3' (G.L	.) Mu]1	ti-Well U	ndetermined 0 t	his time			
23.	P	ROPOSED CASING AND			<u> </u>	<u> </u>	
C17E 0= (10) =							
SIZE OF HOLE	SIZE OF CASING	1	SETTING DEPTH SACKS O		F CEMENT EST. TOP		
24"	20"	94#	400 '	580		Circ	
17 1/2"	13 3/8"	48, 54.5 & 61#	3300 '	750		2550'	
12 1/4"	9 5/8"	40 & 47#	8000 <sup>1</sup>	1200		3000'	
7 7/8"	5 1/2"	17 & 20#	12000'	1130	· <del>-</del>	6000'	
nowever, a a	ouble ram nyara	ram will vary acc ulic BOP will be ilized on this v	e required. A	contractorotating	or selec head an	ted. d	
HABOVE SPACE DESCRIBE PROVE ZONE, GIVE SLOWOUT PREVENTE thereby certify that the information gned	A PROGRAM, IF ANT.	PROPOSAL IS TO DEEPEN OR P lete to the best of my know Tille Vice Presid	PLUG BACK, GIVE DATA ON wledge and belief.		PIRES STILLING U	NDERWAY	
(This space for S	tate Use)						
Calping as	ಚಿತ್ರವಾದ ಜತೆ ಅಭಿಸರ್ಗಳ <b>ತಿರ್ಣ</b> ಗ	ON .				1 1004	
PPROVED BY	CUI SUPERVISOR	TITLE			NC	)V - 1 1984	

ONDITIONS OF APPROVAL, IF ANY: