

Submit to Appropriate
District Office
State Lease - 6 copies
Fee Lease - 5 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

API NO. (assigned by OCD on New Wells)
30-025-31444
5. Indicate Type of Lease
STATE ☒ FEE ☐
6. State Oil & Gas Lease No.
B-2516

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK					
1a. Type of Work:			7. Lease Name or Unit Agreement Name		
DRILL ☒ RE-ENTER ☐ DEEPEN ☐ PLUG BACK ☐			SMGSAU Tract 9		
b. Type of Well:			8. Well No.		
OIL WELL ☒ GAS WELL ☐ OTHER ☐			6		
SINGLE ZONE ☒ MULTIPLE ZONE ☐			9. Pool name or Wildcat		
2. Name of Operator			Maljamar (G-SA)		
Cross Timbers Operating Company					
3. Address of Operator					
P. O. Box 50847, Midland, Texas 79710					
4. Well Location					
Unit Letter A : 950 Feet From The East Line and 1,200 Feet From The North Line					
Section 32 Township 17S Range 33E NMPM Lea County					
10. Proposed Depth			11. Formation		12. Rotary or C.T.
4,600'			San Andres		Rotary
13. Elevations (Show whether DF, RT, GR, etc.)		14. Kind & Status Plug. Bond	15. Drilling Contractor		16. Approx. Date Work will start
4,050.9' (GR)		Blanket	Peterson		11/15/91
17. PROPOSED CASING AND CEMENT PROGRAM					
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12-1/4"	8-5/8"	23#	300'	200	Surface
7-7/8"	5-1/2"	15.5#	4,600'	1,150	Surface

Drill 12-1/4" hole to 300'.

Set & cmt 8-5/8" 23# LS csg w/200sx Class "C" w/2% CaCl.

Drill 7-7/8" hole to 4,600' using 10# brine wtr, starch & salt gel.

Set & cmt 5-1/2" 15.5# J-55 csg w/900sx Lite & 250sx Class "C" (cmt vol may vary depending on calipered hole vol).

BOP Program:

11", 3,000 psi, hydraulically operated double ram.

(1) pipe ram, (1) blind ram.

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.

SIGNATURE Gary L. Markestad TITLE Operations Engineer DATE 11/6/91

TITLE OR PRINT NAME Gary L. Markestad TELEPHONE NO. (915) 682-8870

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

07-2-3080

Permit Expires 6 Months From Approval
Date Unless Drilling Underway.

268-1 8024

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RECEIVED

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OCD
HOBBS OFFICE