

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

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

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

API NO. (assigned by OCD on New Wells)

30-025-32244

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

K-4606

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL ☒ RE-ENTER ☐ DEEPEN ☐ PLUG BACK ☐

b. Type of Well:

OIL WELL ☒ GAS WELL ☐ OTHER ☐ SINGLE ZONE ☒ MULTIPLE ZONE ☐

7. Lease Name or Unit Agreement Name

NVANU "3"

2. Name of Operator

SAGE ENERGY COMPANY

8. Well No.

2

3. Address of Operator

PO Drawer 3068 Midland, Texas 79702

9. Pool name or Wildcat

NORTH VACUUM (ABO)

4. Well Location

Unit Letter I : 1980 Feet From The South Line and 660 Feet From The East Line

Section 1 Township 17-S Range 34-E NMPM Lea County

10. Proposed Depth

8800'

11. Formation

ABO

12. Rotary or C.T.

Rotary

13. Elevations (Show whether DF, RT, GR, etc.)

4022.7 GR

14. Kind & Status Plug. Bond

BLANKET

15. Drilling Contractor

PETERSON DRILLING

16. Approx. Date Work will start

10-25-93

17.

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#	400'±	400	SURFACE
11"	8-5/8"	24# & 32#	4600'±	2000	400'
7-7/8"	4-1/2"	10.5# & 11.6#	8800'±	300	7800'

Blow out prevention system: 4-1/2" drill pipe rams
Set of blanks
Hydril clamped around kelly

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

Tonya Streun

TITLE Production Clerk

DATE 9-24-93

TYPE OR PRINT NAME

Tonya Streun

(915) 683-5271

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

SEP 29 1993

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

SEP 27 1993

**JOHN HOBBS
OFFICE**