

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

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

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)

30-025-32382

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

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

McMillan

8. Well No.

2

2. Name of Operator

SOUTHWEST ROYALTIES, INC.

3. Address of Operator

P.O. Box 11390, Midland, Tx 79702-8390

9. Pool name or Wildcat

Eumont

4. Well Location

Unit Letter K

: 1980'

Feet From The South

Line and

1980'

Feet From The

West

Line

Section 29

Township

18S

Range

37E

NMPM

Lea

County

10. Proposed Depth

4900'

11. Formation

San Andres

12. Rotary or C.T.

Rotary

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

3723.5 G.L.

14. Kind & Status Plug. Bond

Blanket

15. Drilling Contractor

16. Approx. Date Work will start

1-30-94

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	24 #	450'	250sx	Circulate
7-7/8	5-1/2	15.50 #	5000'	900 sx	Tie bsck to 8-5/8
					csg.

1. Drill 12-1/4" hole to 450'. Run 450' of 8-5/8" 24# J-55 ST&C csg. Cement with 250 sx class "C" cement. Circulate to surface.
2. Drill 7-7/8" hole to 5000'. Run 5000' of 5-1/2" 15.5# J-55 ST&C csg. Cement with 600 sx light cement + 300 sx class "C" with additives or enough to tie back into 8-5/8" csg. Verify by Survey.

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

Joe T. Janica

TITLE

AGENT

DATE

1-5-94

TYPE OR PRINT NAME

Joe T. Janica

TELEPHONE NO. 505-392-2112

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

JAN 12 1994

CONDITIONS OF APPROVAL, IF ANY: