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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

5A. Indicate Type of Lease
STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

Type of Work

Type of Well	DRILL <input checked="" type="checkbox"/>	DEEPEN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>
Oil Well <input checked="" type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER <input type="checkbox"/>	SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>

Name of Operator

Gulf Oil Corporation

Address of Operator

Box 670, Hobbs, New Mexico 88240

Location of Well

UNIT LETTER M LOCATED 990 FEET FROM THE South LINE

660 FEET FROM THE West LINE OF SEC. 19 TWP. 19-S RGE. 35-E NMPM

7. Unit Agreement Name

8. Farm or Lease Name

Peoples Security Co. A

9. Well No.

1

10. Field and Pool, or Wildcat

Undesignated Lea Bone Sp

12. County

Lea

19. Proposed Depth

10,350'

19A. Formation

Bone Springs

20. Rotary or C.T.

Rotary

21. Elevations (Show whether DF, RT, etc.)

3810'

21A. Kind & Status Plug. Bond

Blanket

21B. Drilling Contractor

22. Approx. Date Work will start

July 1, 1974

23.

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#	303'	300 sacks	Circulated
11"	8-5/8"	24 & 36#	4028'	1500 sacks	
7-7/8"	5-1/2"	15.5 & 17#	10,350'	500 sacks	

Well was drilled to 9010' and completed dry by Jack Markha, et al as their Superior-Alvis, Trustee No. 1 and plugged and abandoned December 1, 1974.

Plans have been made to re-enter, set 8-5/8" casing from 8-5/8" stub at 492' to surface. Clean out to TD at 9010' and drill new 7-7/8" hole to 10,350' and complete in Lea Bone Springs Pool.

APPROVAL VALID
FOR 90 DAYS UNLESS
DRILLING COMMENCED,

EXPIRES 9-25-74

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.

Signed [Signature] Title Area Production Manager Date June 25, 1974

(This space for State Use)

APPROVED BY [Signature] TITLE SUPERVISOR DATE JUN 25 1974

CONDITIONS OF APPROVAL, IF ANY: