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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

5A. Indicate Type of Lease	
STATE <input checked="" type="checkbox"/>	FEE <input type="checkbox"/>
5. State Oil & Gas Lease No.	
B 1520	

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		8. Farm or Lease Name State Bridges	
2. Name of Operator Socony Mobil Oil Company, Inc.		9. Well No. 104	
3. Address of Operator Box 1800, Hobbs, New Mexico		10. Field and Pool, or Wildcat Abo, Vac. Wolfcamp and Vac. Upper Penn.	
4. Location of Well UNIT LETTER B LOCATED 520 FEET FROM THE North LINE AND 2120 FEET FROM THE 1800 LINE OF SEC. 25 TWP. 17 S RGE. 34 E NMPM		12. County Lea	
19. Proposed Depth 10,200		19A. Formation Abo, Wolfcamp, Upper Penn	
20. Rotary or C.T. Rotary		21. Elevations (Show whether DP, RT, etc.) 4020' GL	
21A. Kind & Status Plug. Bond On file		21B. Drilling Contractor Notify on C-103	
22. Approx. Date Work will start			

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"	45#	350	350	Circ.
12 1/4"	9 5/8"	32.3-36# & 40#	5000	3575	Circ.
8 3/4"	7"	23# & 26#	10200	1520	Tie cement in w/intermediate casing

Top out w/2 jts. of 7 5/8" 26.4# casing.

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 J. J. McDaniel Title Group Supervisor Date April 8, 1965
(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: