

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

HOBBS OFFICE O.C.C.

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

NEW MEXICO OIL CONSERVATION COMMISSION
Orig & 2cc: OCC, Hobbs
cc: Regional Office
cc: file

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

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Sinclair Oil & Gas Company	8. Farm or Lease Name C. M. Selby
3. Address of Operator P. O. Box 1920, Hobbs, New Mexico	9. Well No. 1
4. Location of Well UNIT LETTER <u>G</u> <u>1980</u> FEET FROM THE <u>North</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>18</u> TOWNSHIP <u>17S</u> RANGE <u>37E</u> NMPM.	10. Field and Pool, or Multiple Midway Abo
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Lea

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

6-3-66 Spudded 17-1/2" hole 6-3-66 12:30 AM, drilled to 353'. Ran 352' of 13-3/8"OD H-40 48# casing set @ 352' and cemented w/360 sacks (210 sacks Class A 4% Gel, 2% Cal. Chl. plus 150 sacks Class A Neat w/2% Cal. Chl. Cement Circulated. WOC 24 hrs.
6-4-66 Pressure tested 13-3/8"OD casing to 600# for 30 mins. Tested O.K.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED [Signature] TITLE Superintendent DATE 6-7-66

APPROVED BY [Signature] TITLE DATE

CONDITIONS OF APPROVAL, IF ANY:

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION O. C. C.

Form C-101
Revised 1-1-65

MAY 20 9 22 AM '66

5A. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.
7. Unit Agreement Name
8. Farm or Lease Name C. M. SELBY
9. Well No. 1
10. Field and Pool, or Wildcat MIDWAY ABO
12. County IEA
19. Proposed Depth 9100
19A. Formation BONE SPRINGS REEF
20. Rotary or C.T. ROTARY
21. Elevations (Show whether DF, R etc.)
21A. Kind & Status Plug. Bond IN EFFECT
21B. Drilling Contractor NOT LET
22. Approx. Date Work will start WHEN APPROVED

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>	2. Name of Operator SINCLAIR OIL & GAS COMPANY	3. Address of Operator BOX 1470, MIDLAND, TEXAS	4. Location of Well UNIT LETTER G LOCATED 1980 FEET FROM THE NORTH LINE AND 1980 FEET FROM THE EAST LINE OF SEC. 18 TWP. 17-S RGE. 37-E NMPM
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"OD	48#	350	300	SURFACE
11"	8-5/8"OD	24# & 32#	4850	1500	300'
7-7/8"	4-1/2"OD	9.5#, 10.5# & 11.6#	9100	1200	4800'

APPROVAL VALID
OF 30 DAYS UNLESS
DRILLING COMMENCED
EXPIRES 5/19/66

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 Robert J. [Signature] Title ADMINISTRATIVE CLERK Date MAY 18, 1966
(This space for State Use)

APPROVED BY [Signature] TITLE DATE
CONDITIONS OF APPROVAL, IF ANY:



LTR



Job separation sheet

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102
Supersedes C-128
Effective 1-1-65

All distances must be from the outer boundaries of the Section.

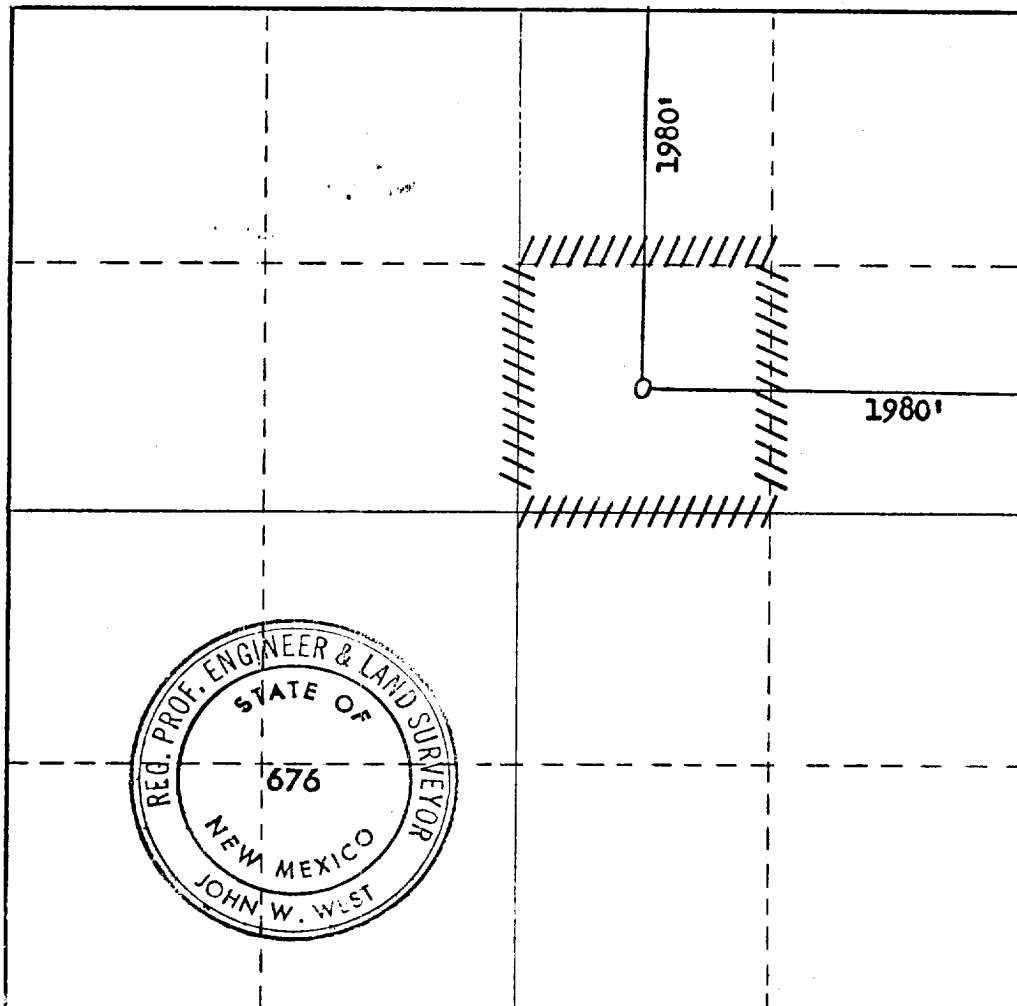
Operator SINCLAIR OIL & GAS COMPANY		Lease C. M. SEIDEN		Well No. 1	
Unit Letter G	Section 18	Township 17 SOUTH	Range 37 EAST	County LEA	
Actual Footage Location of Well: 1980 feet from the NORTH line and 1980 feet from the EAST line					
Ground Level Elev.	Producing Formation BONE SPRINGS REEF	Pool MIDWAY ABO	Dedicated Acreage: 40 Acres		

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

R. E. Cross, Jr.
Name
R. E. CROSS, JR.

Position
ADMINISTRATIVE CLERK

Company
SINCLAIROIL & GAS CO.

Date
MAY 18, 1966

John W. West
I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed
May 19, 1966

Registered Professional Engineer and/or Land Surveyor

John W. West
Certificate No. **676**

330 660 190 1320 1650 1980 2310 2640 2000 1500 1000 500 0