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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

5A. Indicate Type of Lease

STATE ☒ FEE ☐

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 Bridges-State | |
| 2. Name of Operator Mobil Oil Corporation | | 9. Well No. 113 | |
| 3. Address of Operator P. O. Box 633, Midland, Texas 79701 | | 10. Field and Pool, or Wildcat Vacuum | |
| 4. Location of Well UNIT LETTER <u>E</u> LOCATED <u>830</u> FEET FROM THE <u>West</u> LINE AND <u>1980</u> FEET FROM THE <u>North</u> LINE OF SEC. <u>24</u> TWP. <u>17 S</u> RGE. <u>34 E</u> NMPM | | 12. County Lea | |
| 19. Proposed Depth 6450 | | 19A. Formation Glorieta | 20. Rotary or C.T. Rotary |
| 21. Elevations (Show whether DF, RT, etc.) 4034 GL | 21A. Kind & Status Plug. Bond On File | 21B. Drilling Contractor Undesignated | 22. Approx. Date Work will start 8/2/66 |

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 | 1580 | 1200 | Circulate |
| 7-7/8" | 5-1/2" | 14 | 6200 | 500 | 3800 |

Mud Program:

0 - 1580' - Spud Mud
1600 - 4500' - Brine Water
4500 - TD - Brine Water, Flosal & Starch

Logging Program:

Gamma Ray - Sonic - 0 - TD
Laterolog - Csg - TD
Microlaterolog - 4400 - TD
Gamma Ray - Collar - 5500 - TD

EXPIRES 12/31/66

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 [Signature] Title Operations Engineer Date July 27, 1966

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

X Cement must tie back into [Signature]