

30-025-26849

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LAND OFFICE	
OPERATOR	

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.	
LG-0500	
7. Unit Agreement Name	
8. Farm or Lease Name	
Mobil "16" State	
9. Well No.	
1	
10. Field and Pool, or Wildcat	
Wildcat	
12. County	
Lea	
13. Proposed Depth	13A. Formation
13,000'	Devonian
20. Rotary or C.T.	
Rotary	
21. Elevations (Show whether DF, RT, etc.)	22. Approx. Date Work will start
3694.7' GR	6-12-80

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK	
1a. Type of Work	
b. 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"/>	
2. Name of Operator	
DAVID FASKEN	
3. Address of Operator	
608 First National Bank Building, Midland, TX 79701	
4. Location of Well	
UNIT LETTER C LOCATED 660 FEET FROM THE North LINE	
AND 1980 FEET FROM THE West LINE OF SEC. 16 TWP. 17-S RGE. 38-E NMPM	
13. Proposed Depth	
13,000'	
13A. Formation	
Devonian	
20. Rotary or C.T.	
Rotary	
21. Elevations (Show whether DF, RT, etc.)	
3694.7' GR	
21A. Kind & Status Plug. Bond	
Statewide	
21B. Drilling Contractor	
Landis Drilling Co.	
22. Approx. Date Work will start	
6-12-80	

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	400	400	Circulate
12-1/4"	8-5/8"	24 & 32	5200	1850	Circulate
7-7/8"	4-1/2"	11.60 & 13.50	13000	850 1st Stage w/DV @ 9700'	
				870 2nd Stage	----- 4500'

Please refer to attached Drilling & Completion Procedure.

APPROVAL VALID
FOR 90 DAYS UNLESS
DRILLING COMMENCED,

EXPIRES

9/2/80

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 H. Angevine Title Robert H. Angevine, Agent Date 6-4-80

(This space for State Use)

APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT 1

CONDITIONS OF APPROVAL, IF ANY:

DATE

JUN 5 1980