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LAND OFFICE		
OPERATOR		

# NEW MEXICO OIL CONSERVATION COMMISSION

30-025-27552

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.

Fee Lease

7. Unit Agreement Name

8. Farm or Lease Name

Lottie York

9. Well No.

1

10. Field and Pool, or Wildcat

Wildcat

## APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work	DRILL <input checked="" type="checkbox"/>	DEEPEN <input type="checkbox"/>	PLUG BACK <input type="checkbox"/>
b. Type of Well	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

Inexco Oil Company

3. Address of Operator

Suite 290 One Marienfeld Place Midland, Texas 79701

4. Location of Well

UNIT LETTER P LOCATED 990 FEET FROM THE South LINE

AND 660 FEET FROM THE East LINE OF SEC. 14 TWP. 17 S RGE. 37 E NMPM

12. County

Lea

19. Proposed Depth

12350

19A. Formation

Mississippian

20. Rotary or C.T.

Rotary

21. Elevations (show whether DE, RT, etc.)

3727.1 GR

21A. Kind & Status Plug. Bond

Blanket

21B. Drilling Contractor

Warton

22. Approx. Date Work will start

Nov. 1, 1981

23.

### PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
26	20"	94#	50'	75	Surface
17 1/2	13 3/8"	48#	450'	475	Surface
12 1/4	9 5/8"	40#	4850'	2100	Surface
8 1/2	5 1/2"	17#	12350'	1100	7500

Blowout preventers to be adequate for depth and area.  
Completion to be conventional perforation and treatment.  
Gas acreage has not been committed to contract.

APPROVAL VALID FOR 180 DAYS  
PERMIT EXPIRES 3/3/82  
UNLESS DRILLING UNDERWAY

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.

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

igned

*[Signature]*

Title Agent

Date 8/27/81

(This space for State Use)

APPROVED BY

*[Signature]*  
DATE 8/27/81

TITLE

DATE

CONDITIONS OF APPROVAL