

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
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.	
<b>E-8072</b>	
7. Unit Agreement Name	
8. Farm or Lease Name	
<b>State Lea 688</b>	
9. Well No.	
<b>#1</b>	
10. Field and Pool, or Wildcat	
<b>Eumont</b>	
12. County	
<b>Lea</b>	
19. Proposed Depth	19A. Formation
<b>4065</b>	<b>Eumont</b>
20. Rotary or C.T.	
	<b>Seven Rivers</b>
21. Elevations (Show whether DF, RT, etc.)	21A. Kind & Status Plug. Bond
<b>3658 DF</b>	<b>State Wide</b>
21B. Drilling Contractor	22. Approx. Date Work will start
	<b>Jan. 5, 1976</b>

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK	
1a. Type of Work	
b. Type of Well DRILL <input type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>	
OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <b>Re-enter to same</b> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>	
2. Name of Operator	
<b>Bearing Service &amp; Supply Co., Inc.</b>	
3. Address of Operator	
<b>P. O. Box 100 Artesia, New Mexico 88210</b>	
4. Location of Well	
UNIT LETTER <b>A</b> LOCATED <b>660</b> FEET FROM THE <b>North</b> LINE	
AND <b>660</b> FEET FROM THE <b>East</b> LINE OF SEC. <b>25</b> TWP. <b>20</b> RGE. <b>35</b> NMPM	
23.	

## PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP

Plan to ren-enter with pulling unit and reverse rig or cable tools: will drill out 10 sack plug at top of hole. Reverse out mud to bottom of 10 3/4" pipe left in hole: Drill 25 sack plug at 307 ft: Reverse out mud to top of 7" pipe cut off at 1307 ft: Drill out 25 sack plug: Run 1307 ft of 7" pipe and tie into old pipe: Reverse out mud until we reach 25 sack plug spotted across perms at 3994'-4026': Re-perforate, acidize and attempt to resume production. Will install blow-out preventer.

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 Manager Date 12-17-75

(This space for State Use)

APPROVED BY *[Signature]* TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: