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NO. OF COPIES RECEIVED		NEW MEXICO OIL CONSERVATION COMMISSION Form C-101					
DISTRIBUTION	NEW M	EXICO OIL CONSER	VATION COMMISSION		Revised 1-1-65		
SANTA FE	-			Γ	5A. Indicate T	ype of Lease	
FILE				İ	STATE 🔽	FEE	
U.S.G.S.	+				5. State Oil &	Gas Lease No.	
LAND OFFICE					B - 11	0233	
OPERATOR					HHHH.		
A DDL LCATION	FOR PERMIT TO E	DRILL DEEPEN O	R PLUG BACK				
APPLICATION 1a. Type of Work	TOK I EKWIT TO E	71112, 022, 217			7. Unit Agreen	nent Name	
			DI UC D	ACK			
b. Type of Well		DEEPEN	PLUG B	ACK []	8. Farm or Lea	ise Name	
OIL GAS WELL	OTHER	s	INGLE WULT	ZONE	State 9. Well No.	KN-12	
2. Name of Operator	OTHER				9. Well No.		
=					7		
Conoco Inc.  3. Address of Operator						Pool, or Wildcat	
	1/ LL 1/ M dd2	40			Eumont Yat	es 7 Ryrs Queen	
P. D. Box 460 . A	70003, N.M. O.C.	730	5 500 745	LINE	77/1/7/		
UNIT LETTE	R LOCA	TED FE	EI FROM THE				
AND 1/050 FEET FROM	THE <b>E</b> LINE	OF SEC. 12 TV	IP. 195 RGE. 30	E NMPM			
AND 650 FEET FROM	IIIIIIIIII				12. County		
					Lea		
<del>( </del>	<del>/////////////////////////////////////</del>						
				//////			
<del>AHHHHHHH</del>	444444444444	44444	Proposed Depth	9A. Formation		20. Rotary or C.T.	
			3930	Queer	3,	Rotary Date Work will start	
21. Elevations (Show whether DF,	RT, etc.) 21A. Kind	& Status Plug. Bond 2	IB. Drilling Contractor				
3925.5 6R					Jan.	16,1980	
23.	D!	ROPOSED CASING AND	CEMENT PROGRAM				
			· · · · · · · · · · · · · · · · · · ·	Tanaka or	CEMENT	EST, TOP	
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT					
72 "14"	85/8"	24" 15.5"	1400' 3930'	674		<u>oʻ</u>	
7 7/8"	5 1/2"	15.5	3930	778			
					ļ		
	1	ı					
<del></del>	proposed to di	rill a straigh	+ hole to a Ti	D of 39	30' & C	Lomplete	
1 + 13 )	proposea (0 a)	riir a scraige	C PEOIL I - CE I	, -,		,	
$\sim$	1 1011	•					
as a queen	bil well.						
c	chment for E	RAP Acocram					
See atta	enment for L	program.					
				•			
				-			
IN ABOVE SPACE DESCRIBE P	BOROSED PROGRAM: IF	PROPOSAL IS TO DEEPEN	OR PLUG BACK, GIVE DATA	ON PRESENT P	RODUCTIVE ZONE	AND PROPOSED NEW PRODU	
TIVE ZONE. GIVE BLOWOU! PREVER	TER PROGRAM, IT ANTI-						
I hereby certify that the informat	ion above is true and com	plete to the best of my k	nowledge and belief.				
-/ ON	11/2/10/1				Date	2/28/79	
Signed WW Q. Ja	wignes	_ Title_ <u>Maministra</u>	tive Supervisor				
(This space for	State Use)					10 0 1 40 <b>70</b>	
(/	Soll	ومعدرات المال	משטורו ממסת	<i></i>	DE	1031 <b>1979</b>	
	ALVIIII	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		ar water had	DATE		

CONDITIONS NMOCD (V FILE JFB - Z