## Submit to Appropriate District Office State Lease — 6 copies Fee Lease — 5 copies

## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-101 Revised 1-1-89

DISTRICT I P.O. Box 1980, Hobbs, NM 88240  DISTRICT II P.O. Drawer DD, Artesia, NM 88210  DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410				5. Indicate	API NO. (assigned by OCD on New Wells)  30-025-31856  5. Indicate Type of Lease  STATE X FEE  6. State Oil & Gas Lease No.  E-3441		
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK							
la. Type of Work:	TION TOTAL ENIMA		7. Lease Name or Unit Agreement Name				
DRIL b. Type of Well: OIL GAS WELL WELL [2]	_	R DEEPEN SINGLE	PLUG BACK MULTIPLE ZONE		zi "16" s		
2. Name of Operator Mitchell Energy Corporation 8. Well No.							
3. Address of Operator P.O. Box 4000, The Woodlands, TX 77387-4000					9. Pool name or Wildcat West Teas (Môrrow)		
4. Well Location Unit Letter  Section	G: 1730 Feet  6 Town	From The north	Line and	1980 Feet	From The	east Line	
		10. Proposed Depth		11. Formation	I	12. Rotary or C.T.	
13. Elevations (Show wheth	on DE PT CP etc.)	14,10	<del></del>	Morrow	r	Rotary	
	R	14. Kind & Status Plug. Bond Blanket on File	15. Drilling Cont	ractor	16. Approx. D	ate Work will start	
17. PROPOSED CASING AND CEMENT PROGRAM							
SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEP		CEMENT	EST. TOP	
26."	20"	94#	500'	1150 sks		Surface	
17-1/2"	13-3/8"	68#	2950'		+250Prem	Surface	
12-1/4"	8-5/8"	32#	5300'		+250Prem	2500'	
7-7/8"	5-1/2"	17#	TD	600Lite+		9000'	
Mitchell							

well will be plugged and abandoned in a manner consistent with State of New Mexico regulations. Blowout preventer schematic attached as Exhibits 1 & 1A.

<del>-</del>		
IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.	) DEEPEN (	OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE
I hereby certify that the information above is true and complete to the best of my knowle	dge and be	die.
SKONATURE Deorge Mulle	-	Regulatory Affairs Specialist 01-11-93
TYPEOR PRINT NAME George Mullen		TELEPHONE NO. (713) 377-585.
(This space for State ORIGINAL SECURED BY JERRY SEXTON BETRICE I SUPERVISOR		MAR 0 2 1993
APPROVED BY	_ mle	
CONDITIONS OF APPROVAL, IF ANY:		
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