

Submit to Addressee
District Office
State Lease - 6 copies
Fee Lease - 5 copies

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 4-1-89

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

API NO. (assigned by OCD on New Wells)

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

NM 199

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL ☒

RE-ENTER ☐

DEEPEN ☐

PLUG BACK ☐

b. Type of Well:

OIL
WELL ☐

GAS
WELL ☒

OTHER ☐

SINGLE
ZONE ☐

MULTIPLE
ZONE ☐

7. Lease Name or Unit Agreement Name

McGrail State

2. Name of Operator

Marathon Oil Company

8. Well No.

3

3. Address of Operator

P O Box 552, Midland, TX 79702

915/ 682-1626

9. Pool name or Wildcat

Sumont-Yates, TR-Queen

4. Well Location

Unit Letter K : 1880 Feet From The SOUTH Line and 1980 Feet From The WEST Line

Section 26

Township 19-S

Range 36-E

NMPM

Lea

County

10. Proposed Depth

3700'

11. Formation

Yates-SR-QN

12. Rotary or C.T.

rotary

13. Elevations (Show whether DF, RT, GR, etc.)

3674'

14. Kind & Status Plug, Bond

blanket-current

15. Drilling Contractor

unknown

16. Approx. Date Work will start

7-20-94

17.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12-1/4"	8-5/8"	24#	± 1200'	550	surf
7-7/8"	5-1/2"	15.5#	± 3700'	330	± 1000'

Proposed BOP equipment: 13-5/8", 3M annular preventer used as diverter. Production hole: 11" 3M, dual ram, annular, choke manifold & rotating head. All csg shall be run & cmt'd in accordance to NMOCD Rule #107. All BOP equipment shall be installed and operated in accordance to NMOCD Rules #109 & #114.

OPER. UGRIID NO. 14021

PROPERTY NO. 6440

POOL CODE 76480

EFF. DATE 7-12-94

API NO. 30-025-32579

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 correct to the best of my knowledge and belief.

SIGNATURE W. J. Dumas for TB Arnold TITLE Drig Supt.

DATE 7-07-94

TELEPHONE NO.

TYPE OR PRINT NAME

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

JUL 12 1994

APPROVED BY _____ TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

JUL 12 1964

COMMUNICATIONS
OFFICE