NU. OF COMES MICEIVED				·	. G 101	
DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION				orm C-101 levised 14-65	
SANTA FE			·	[7]	SA_Indicate	Type of Lease
FILE				1	STATE X	
u.s.g.s.	1			<u> </u>	S. State Cil &	Gus Lease No.
LAND OFFICE					A-2614	
OPERATOR				<u> </u>	MITTE	THIMIN THE
	SOO DEDUCT TO	DOUL DEEDEN (DO PLUG BACK			
	FOR PERMIT TO I	DRILL, DEEPEN, C	JA I LOO BACK		7. Unit Agree	ment Name
a. Type of Work					-	
DRILL X	DRILL X DEEPEN PLUG BACK				8. Form or Lease Name	
b. Type of Well			SINGLE X MULT	ONE	McDona1	d State A/C 2
were [] were []	OTHER		204E [41]		9. Well No:	
Nome of Operator					31	
Marathon Oil Company					10. Field and Pool, or Wildean	
P. O. Box 2409, Hobbs, New Mexico 88240					Drinkard	
-4 V(-1)		1000	EET FROM THE North	LINE		
LOCATION OF WALL BAST LETTE	н <u> </u>	1800 F	EEL PROM LAG	}		
1650	THE East LINE	E OF SEC. 13 T	WP22-S RCE. 36-E	HMPM		777777777
THE 1650 FEET FROM		MINITIAN			12. County	
				777777	Lea	
HHHH:::HHH	HHHHH					
				777777		20. Hology of C.T.
44444444	<i>HHHHH</i>	THITTHE THE		A. Formation		
		1111111111	7000 '	Drinkar	d	Rotary
21. Leversons (Show whether DF,	RT, etc.) 21A. Kind	& Status Plug. Bond	218, Drilling Contractor		1	Date Work will start
3471' GL	Curre	nt	Unknown		June	5, 1978
23.	P	ROPOSED CASING AN	CEMENT PROGRAM	*-		••.
	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF	CEMENT	EST. TOP
SIZE OF HOLE	8 5/8" 24# 1300'		500 Circulate			
	5 1/2"	15.5#	7000 '	2000		Circulate
7 7/8"	J 1/2	23.3"				
		į	1	1		
Intend t	o drill to appro	ximately 7000'	•			
Intendic	O dilli co appi					
Cement and test all casing by approved methods.						
R1owout	equipment to be	used is 900 Se	ries Cameron or	equivale	ent with	pipe .
and blan	k rams. Remote	controls will	be located on th	e derric	k floor	with
the clos	ing unit a minir	num of 75 ft. f	rom the well hea	d.		
				. :		
		*	e e e e e e e e e e e e e e e e e e e			
		•				
			• .			
	· ' •					
			ON SELIC HACK CIVE DATA O	N PRESENT P	COUNCLIAE ZON	E 人名日 サチロチロコミヤ れたが サポロ
IN ABOVE SPACE DESCRIBE P	HOPOSED PROGRAM: IF TER PROGRAM, IF ANT.	PROPOSAL IS TO DECPER				
I hereby certify that the informat	ion above is true and con	plete to the best of my	knowledge and belief.			
t needby certain that the hadding	/ ,				_ 5-1	

MAY 15 19/8

CONDITIONS OF APPROVAL, IR ANYS