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## NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101  
Revised 1-1-65

## DISTRIBUTION

SANTA FE

FILE

U.S.G.S.

LAND OFFICE

OPERATOR

5A. Indicate Type of Lease

STATE ☐FEE ☒

5. State Oil &amp; Gas Lease No.

## APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work

DRILL ☐DEEPEN ☐PLUG BACK ☐

b. Type of Well

OIL WELL ☒GAS WELL ☐OTHER ☐SINGLE ZONE ☐MULTIPLE ZONE ☐

2. Name of Operator

BABER WELL SERVICING CO.

3. Address of Operator

P. O. BOX 1772, HOBBS, NEW MEXICO 88240

4. Location of Well

UNIT LETTER L

LOCATED 1980

FEET FROM THE S

LINE

AND 660

FEET FROM THE W

LINE OF SEC. 23

TWP. 16 S

RGE. 38 E

NMPM

7. Unit Agreement Name

L

8. Farm or Lease Name

PEOPLES SECURITY CO.

9. Well No.

I

10. Field and Pool, or Wildcat

GARRETT - SAN ANDRES

12. County

LEA

19. Proposed Depth

5616

19A. Formation

SAN ANDRES

20. Rotary or C.T.

ROTARY

21. Elevations (Show whether DF, RT, etc.)

3715

21A. Kind &amp; Status Plug Bond

Baber Plug Bond

21B. Drilling Contractor

Baber Well Servicing

22. Approx. Date Work will start

4-20-75

23.

## PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
6 3/4"	7"	23	5311'	150	5200
12 1/2"	10 3/4"	32.75	287'	150	Circulated

1. Rig up Baber Well Servicing and reverse unit
2. Drill out dry hole marker and put on well head and reverse unit
3. Drill out plug at 200'-300' and 1800'-2000' and 5200'-5606' TD
4. Pull bit and rerun tubing to 5600'
5. Swab test well to see if commercial
6. Use 6" Series 600/900 B.O.P. with 2 1/2" rams and blanks.

APPROVAL VALID  
FOR 90 DAYS UNLESS  
DRILLING COMMENCED,

EXPIRES 6-24-75

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 Gray C. Baber Title PRESIDENT

Date March 6, 1975

(This space for State Use)

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

CONDITIONS OF APPROVAL, IF ANY: