

30-025-27164

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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101  
Revised 1-1-65

5A. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No. -----

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work b. Type of Well DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		7. Unit Agreement Name -----
2. Name of Operator MORRIS R. ANTWEIL		8. Farm or Lease Name ROBERTS
3. Address of Operator Box 2010, Hobbs, N. M. 88240		9. Well No. 1
4. Location of Well UNIT LETTER <u>P</u> LOCATED <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM THE <u>East</u> LINE OF SEC. <u>5</u> TWP. <u>20-S</u> RGE. <u>38-E</u> NMPM		10. Field and Pool, or Wildcat Undesignated
		12. County Lea
		19. Proposed Depth 7100'
		19A. Formation Drinkard
		20. Rotary or C.T. Rotary
21. Elevations (Show whether DF, RT, etc.) 3582' GR		21A. Kind & Status Plug. Bond Blanket
		21B. Drilling Contractor MORANCO
		22. Approx. Date Work will start 28 Nov., 1980

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#	1500'	750	Circ.
7-7/8"	5-1/2"	15.5#	7100'	675	2400'

1. Drill 12-1/4" hole to top of salt section.
2. Run 8-5/8" casing and circulate cement. WOC 18 hrs.
3. Test casing and BOP to 1500 psi.
4. Drill 7-7/8" hole to TD 7100'. Log well.
5. Run 5-1/2" casing and cement with sufficient cement to cover potential producing formations.
6. Test casing to 1500 psi.
7. Perforate and production test.

APPROVAL VALID  
FOR 90 DAYS UNLESS  
DRILLING COMMENCED,

EXPIRES 2/25/81

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 R. M. Williams Title Agent Date 24 Nov., 1980

(This space for State Use)

APPROVED BY [Signature] TITLE SECRETARY OF COMMISSION DATE       

CONDITIONS OF APPROVAL, IF ANY: