31-125-2-11.68

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DISTRIBUTION	NEW MEXICO OIL CONSERVATION COMMISSION				
SANTA FE				Form C-101 Revised 1-1-6	5
FILE			T	5A. Indicate	Type of Lease
U.S.G.S.				STATE	FEE X
LAND OFFICE			-	5, State Oil	& Gas Lease No.
OPERATOR					
			7	<u>IIIIII</u>	
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK					
1a. Type of Work				7. Unit Agre	ement Name
	DEEPEN				
b. Type of Well		FLUC		8, Farm or L	ease Name
OIL GAS WELL OTH	ER	SINGLE MI	ZONE	Louie	
2. Name of Operator				9. Well No.	
MORRIS R. ANTWEIL					
3. Address of Operator				10. Field an	d Pool, or Wildcat
Box 2010 Hobbs, New M	, New Mexico 88240			Undesi	gnated
4. Location of Well UNIT LETTER G	LOCATED 2310	FEET FROM THE North			
				///////	
AND 2310 FEET FROM THE Eas	t LINE OF SEC. 5	TWP. 20-5 RGE. 3			
				12. County	
				Lea	
())))))))))))))))))))))))))))))))))))					
//////////////////////////////////////				20. Rotary or C.T.	
		7150	Drinkard		Rotary
21. Elevations (Show whether DF, RT, etc.)	21A. Kind & Status Plug. Bond	21B. Drilling Contractor		22. Approx	. Date Work will start
<u>3582' GR</u>	Blanket	MORANCE		7 Dec	1981

PROPOSED CASING AND CEMENT PROGRAM

			SACKS OF CEMENT	EST. TOP
8-5/8"	24#	1500'	750	Circ
5-1/2"	15.5# & 17#	7150'	700	3500'
	5 1 /01	2411	2411 1500	

- 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 of 7150'. Log well.
- 5. Run 5-1/2" casing and cement with sufficient cement to cover potential producing formations.
- 6. Perforate, treat and production test.

APPerday March 1 150 5198 1936 - The Color Color Star UNLESS FRANCE COLOR NOT

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUC-TIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

I hereby certify that the information above is true and	d complete to the best of my knowledge and belief	ſ.
Signed Ing Will	Tule Agent	Date 30 November 1981
(This space for State Use)		
••••		
APPROVED BY	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		