

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

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-101
Revised 1-1-89

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)

30-025-32128

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

B-2656

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

Hardy 36 State

2. Name of Operator

Conoco, Inc.

8. Well No.

1

3. Address of Operator

10 Desta Dr. Ste 100W, Midland, TX 79705

9. Pool name or Wildcat

Undesignated Ellenburger

4. Well Location

Unit Letter K : 1980 Feet From The south Line and 2230 Feet From The west Line

Section 36

Township 20S

Range 37E

NMPM

Lea

County

10. Proposed Depth
10,500'

11. Formation
Ellenburger

12. Rotary or C.T.
Rotary

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

3489.1'

14. Kind & Status Plug. Bond

Blanket

15. Drilling Contractor

16. Approx. Date Work will start

8/1/93

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17-1/2"	13-3/8"	54.5#	500'	500 sx	circulated
12-1/4"	9-5/8"	36#	3900'	1250 sx	circulated
8-3/4"	5-1/2"	17#	10,500'	950 sx	

It is proposed to drill this well vertically through the Ellenburger formation according to the plan outlined in the following attachments:

1. Well Location and Acreage Dedication Plat (C-102)
2. Proposed Well Plan Outline.
3. Cementing Program.
4. BOP Specifications.

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.

SIGNATURE

Jerry W. Hoover

TITLE

Sr. Conservation Coordinator

DATE 7/15/93

TYPE OR PRINT NAME

Jerry W. Hoover

(915) 686-6548 TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE JUL 19 1993

CONDITIONS OF APPROVAL, IF ANY: