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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101  
Revised 1-1-65

5A. Indicate Type of Lease

STATE ☒ FEE ☐

5. State Oil & Gas Lease No.

E-395

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

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		8. Farm or Lease Name	
DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>		WEE A	
2. Name of Operator Millard Deck		9. Well No. 2	
3. Address of Operator P.O.Box 1047, Eunice, New Mexico 88231		10. Field and Pool, or Wildcat Eumont	
4. Location of Well UNIT LETTER L LOCATED 2310 FEET FROM THE South LINE AND 990 FEET FROM THE West LINE OF SEC. 13 TWP. 21S RGE. 35E NMPM		12. County Lea	
19. Proposed Depth 4000'		19A. Formation Seven Rivers Queen Rotary	
21. Elevations (Show whether DF, RT, etc.) 3576.3		20. Rotary or C.T. Rotary	
21A. Kind & Status Plug. Bond Blanket on File		21B. Drilling Contractor Leatherwood Drilling	
22. Approx. Date Work will start 12-15-74			

## PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/2"	8 5/8"	24#	300'	300	Circulate
7 7/8"	5 1/2"	14#	4000'	250	2200

APPROVAL VALID  
FOR 90 DAYS  
EXPIRES 3/24/75

EXPIRES 3/24/75

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 SLOWOUT PREVENTER PROGRAM, IF ANY.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

Signed Millard Deck Title Owner-Operator Date 12-13-74

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

**NEW MEXICO OIL CONSERVATION COMMISSION  
WELL LOCATION AND ACREAGE DEDICATION PLAT**

Form C-102  
Supersedes C-128  
Effective 1-1-65

All distances must be from the outer boundaries of the Section

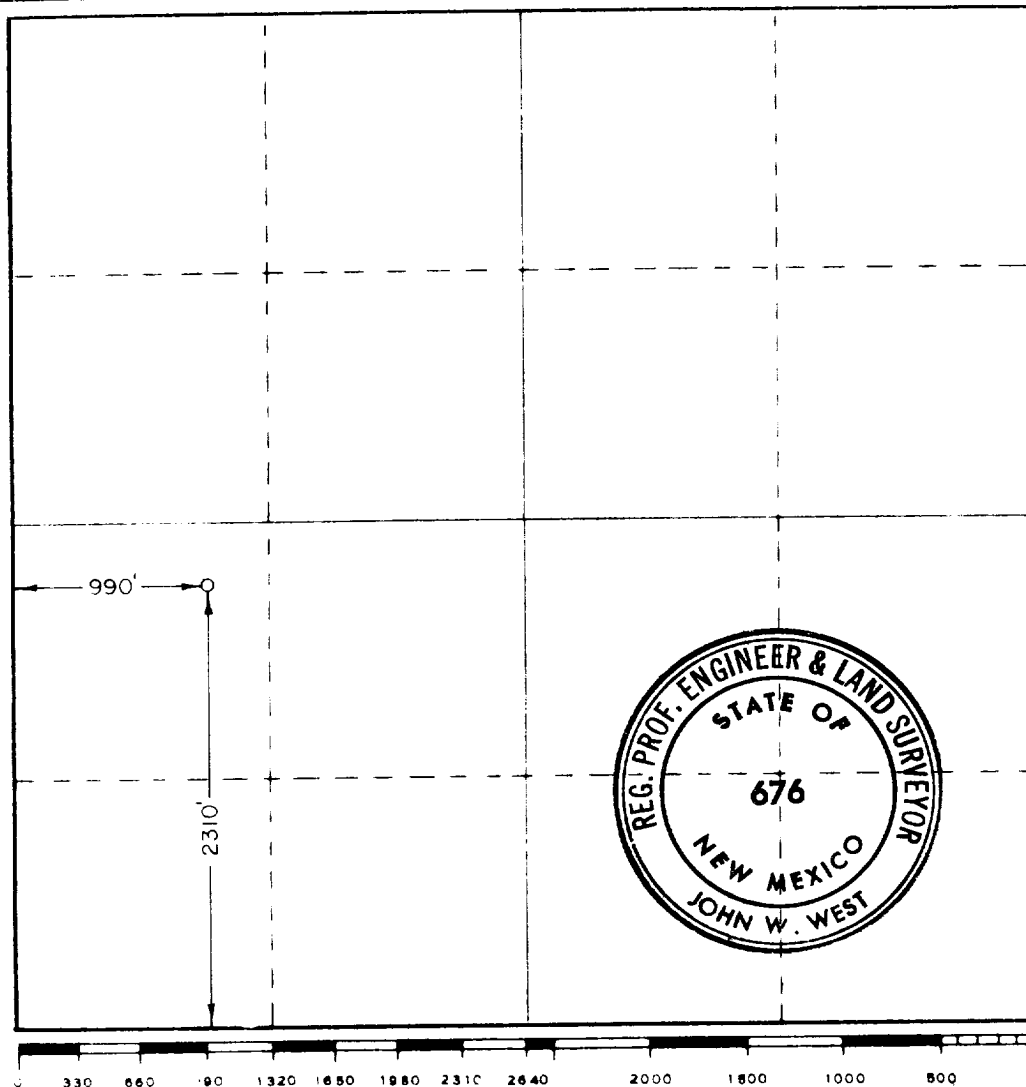
Millard Deck			Lease <b>W.E.E. - A</b>		Well No. <b>2</b>
Range <b>L</b>	Section <b>13</b>	Township <b>21 South</b>	Range <b>35 East</b>	County <b>Lea</b>	
Approximate Location of Well: <b>2310</b> feet from the <b>South</b> line and <b>990</b> feet from the <b>West</b> line					
Ground Level Elev. <b>3576.3</b>	Producing Formation	Pool		Dedicated Acreage:  Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes    ☐ No    If answer is "yes," type of consolidation \_\_\_\_\_

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



**CERTIFICATION**

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Signature: *Millard Deck*  
 Name: *Owner operator*  
 Position: *Millard Deck*  
 Date: *12-13-74*

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed: **November 29, 1974**  
 Registered Professional Engineer and/or Land Surveyor

Signature: *John W. West*  
 Certificate No. **676**