

30-625-29491

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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

5A. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
5. State Oil & Gas Lease No. B2527	
7. Unit Agreement Name None	
8. Farm or Lease Name State	
9. Well No. 1	
10. Field and Pool, or Wildcat Eumont	
12. County Lea	
19. Proposed Depth 4250'	19A. Formation Queen
20. Rotary or C.T. Rotary	
21A. Kind & Status Plug. Bond Blanket	21B. Drilling Contractor Rod Ric
22. Approx. Date Work will start November 15, 1985	

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK	
1. Type of Work 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"/>	
Name of Operator Kern Co.	
Address of Operator 3005 North Big Spring St., Midland, Texas 79705	
Location of Well UNIT LETTER N LOCATED 660 FEET FROM THE South LINE 1980 FEET FROM THE West LINE OF SEC. 7 TWP. 21-S RGE. 37-E NMPM	
Elevations (Show whether DF, RT, etc.) 3487'	
21A. Kind & Status Plug. Bond Blanket	
21B. Drilling Contractor Rod Ric	
22. Approx. Date Work will start November 15, 1985	

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
12 1/4"	9 5/8"	40#	300'	150 sx	Surface
8 1/2"	7 "	23#	4250'	600 sx	300'

Blow out preventor will be 12" 900 series hydraulic controlled.

Permit Expires 6 Months From Approval
Date Unless Drilling Underway.

ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTION 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: William C. Kern Title: Engineer Date: 11-1-85
(This space for State Use)

APPROVED BY: _____ TITLE: _____ DATE: NOV 5 - 1985

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

NOV 4 - 1985

O.C.D.
HOBBS OFFICE