

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)

**3002510130**

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

**FEE**

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL ☐

RE-ENTER ☐

DEEPEN ☐

PLUG BACK ☒

1b. Type of Well:

OIL  
WELL ☒

GAS  
WELL ☐

OTHER ☐

SINGLE  
ZONE ☐

MULTIPLE  
ZONE ☒

2. Name of Operator

**EXXON CORPORATION**

3. Address of Operator

**ATTN: REGULATORY AFFAIRS  
P. O. BOX 1600  
MIDLAND, TX 79702**

8. Well No.

**9**

9. Pool name or Wildcat

**TUBB OIL**

4. Well Location

Unit Letter **J** : **1980** Feet From The **SOUTH** Line and **2080** Feet From The **EAST** Line

Section **9**

Township **22S**

Range **37E**

NMPM

**LEA**

County

10. Proposed Depth

**8080**

11. Formation

**TUBB**

12. Rotary or C.T.

**ROTARY**

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

**3424 DF**

14. Kind & Status Plug. Bond

**BLANKET**

15. Drilling Contractor

**UNK.**

16. Approx. Date Work will start

**ASAP**

17. PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
<b>UNK.</b>	<b>10 3/4</b>	<b>40.5</b>	<b>395</b>	<b>300</b>	<b>SURF</b>
<b>UNK</b>	<b>7 5/8</b>	<b>26.4</b>	<b>2797</b>	<b>1200</b>	<b>SURF</b>
<b>UNK</b>	<b>5 1/2</b>	<b>14, 15.5</b>	<b>8070</b>	<b>680</b>	<b>2550</b>

**DRILL OUT CIBP AT +/- 6130'.**

**SET CIBP AT 6195' W/ 35' CMT ON TOP.**

**PERF. TUBB 5908' - 6130', AC 3500 GAL, FRAC 32000 GAL / 112000 # SD.**

**PERF. BLINEBRY 5423' - 5897', AC 5300 GAL, FRAC 55000 GAL / 226000 # SD.**

**OVERALL PERFS OPEN - 5042'-5156'(PADDOCK), 5423'-5897'(BLINEBRY), 5909'-6130'(TUBB). ALL ZONES WILL BE COMMINGLED AFTER COMPLETION.**

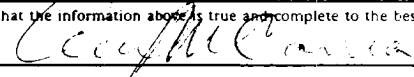
**C-102 IS ATTACHED.**

**MIN BOP DOUBLE RAM 1500# WP.**

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



TITLE **Administrative Specialist**

DATE **08/04/92**

TYPE OR PRINT NAME **Alex M. Correa**

**(915) 688-7532** TELEPHONE NO.

(This space for State Use)

**ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR**

APPROVED BY

TITLE

DATE

**AUG 07 '92**

CONDITIONS OF APPROVAL, IF ANY:

SECRET

AUG 06 1992

OSD HHSBBS OFFICE