NO. OF COPIES HEC	EIVED]		r				· _		
DISTRIBUTION		NEW MEXICO OIL CONSERVATIOF COMMISSION			Forth C-101 Revised 1-1-65					
SANTA FE										Type of 'lease
FILE									SA. Indicate	
U.S.G.S.										
LAND OFFICE		_							.5, State Off a	Gas Lease No.
OPERATOR										
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK										
la. Type of Work									7. Unit Agree	ement Name
*		ר		DEEP	EN 🗌		PU	ЈО ВАСК		
b. Type of Well		-							B. Farm or Le	ease Name
OIL X	GAS WELL]	OTHER Ad	ditiona	1 Comple	tionone		ZONE X	Brunso	n-Argo
2. Name of Operator									9. Well No.	_
Mobil Oil Corporation								10		
3. Address of Operator							10. Field and Pool, or Wildcat			
P. 0. Box	633, M [.]	idland,	Texas	79701					Paddoc	<
4. Location of Well					1880'	FEET FROM T	_e Nor	thLINE		
					_				<u> </u>	
1971'	FEET FROM	Ea	ıst	LINE OF SE	<u>c.</u> 9	тир. 22-	S RGE.	3/-E NMPM	VIIIII	
TITITITI I	IIIII	IIII.	IIIII	IIIII	IIIII		HHH	HHHHH	12. County	
ΛΗΠΙΠΠΛ	(((()))	IIIII	111111	/////	///////	///////	11111.		Lea	
<i>HHHHH</i>	11111	t t t t t	TTTT	TTTTTT	<u>IIIII</u>	IIIIII	IIII			
χ	illilli	14111	HHHH	HHHH.			IIII			
thtttttt	111111	HH. H	$t\bar{t}\bar{t}\bar{t}\bar{t}$	11111	MM	19. Proposed	Depth	19A. Formatic		20. Rotary or C.T.
ΛΗΗΗΗΗ		HHH				7040	(Paddoc	k j	Rotary
21. Elevations (Shou	w whether DI	-, 81, etc.)			is Plug. Bond	21B. Drilling	g Contracto	10	1	Date Work will start
3448-Ground			On File		Unkn	Unknown			9-20-73	
23.				PROPOS	ED CASING	AND CEMENT	PROGRAM	١		

SIZE OF HOLE SIZE OF CAS	SING WEIGHT PERFOUT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
	,			

*This well is presently completed as an oil well in the Drinkard. Permission is requested to re-perforate and stimulate the Drinkard zone, perforate the Paddock and complete as a dual Paddock oil and Drinkard gas well.

APPROVAL VALID FOR 90 DAYS UNLESS DRILLING COMMENCED,

EXPIRES 4

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 complete to the best of my knowledge and belief.

Signed a bond A. D. Bond _{itle}	Proration Staff Assistant	Date	September 17, 1973
(This space for State Use) APPROVED BY HE ALL TITLE_		DATE.	
CONDITIONS OF APPROVAL, IF ANY:	· · · · · · · · · · · · · · · · · · ·		