

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-4-65

5A. Indicate Type of Lease
STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
5. State Oil & Gas Lease No.
B-934

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER WF Injection SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Firm or Lease Name New Mexico State M	
2. Name of Operator HUMBLE OIL & REFINING COMPANY		9. Well No. 46	
3. Address of Operator BOX 1600, MIDLAND, TEXAS		10. Field and Pool, or Wildcat Langlie Mattix	
4. Location of Well UNIT LETTER G LOCATED 1680 FEET FROM THE FNL LINE AND 1680 FEET FROM THE FEL LINE OF SEC. 19 TWP. 22-S RGE. 37-E NMPM		12. County Lea	
19. Proposed Depth 3700		19A. Formation Queen	
20. Rotary or C.T. Rotary		21. Elevations (Show whether DF, RT, etc.) To be filed later	
21A. Kind & Status Plug. Bond Blanket on file		21B. Drilling Contractor Unknown	
22. Approx. Date Work will start Immediately			

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
8-3/4 or 9-7/8	7 or 7-5/8	20 or 24#	300	150	To surf.
6-1/4 or 6-3/4	2-7/8	6.4	TD	200	Circled to 2700'.

Min. mud for samples.

HOWCO method of cmtg to be used.

Sec. IV p.145 (7), pertaining to water injection wells, will be complied with.

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.

Signed C. D. East Title Adm. Supervisor Date 4-20-65

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: