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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.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>		7. Unit Agreement Name
b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input checked="" type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name <b>Lou Wortham "B"</b>
2. Name of Operator <b>ANADARKO PRODUCTION COMPANY</b>		9. Well No. <b>3</b>
3. Address of Operator <b>P. O. Box 247, Hobbs, New Mexico 88240</b>		10. Is it a Spill, or Wildcat <b>UNDESIGNATED</b>
4. Location of Well UNIT LETTER <b>B</b> LOCATED <b>330</b> FEET FROM THE <b>North</b> LINE AND <b>2310</b> FEET FROM THE <b>East</b> LINE OF SEC. <b>11</b> TWP. <b>22 S</b> RGE. <b>37 E</b> NMPM		11. State or Lease Name <b>South Eunice San Andres</b>
		12. County <b>Lea</b>
		19. Proposed Depth <b>3700'</b>
		19A. Formation <b>San Andres</b>
		20. Rotary or C.T. <b>Rotary</b>
21. Elevations (Show whether DF, RT, etc.) <b>35-6' GL</b>	21A. Kind & Status Plug. Bond <b>Blanket on file</b>	21B. Drilling Contractor <b>W.E.K.</b>
		22. Approx. Date Work will start <b>1/6/70</b>

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPT -	SACKS OF CEMENT	EST. TOP
<b>12-1/4"</b>	<b>9-5/8"</b>	<b>24#</b>	<b>350'</b>	<b>225</b>	<b>Circulate</b>
<b>8-3/4"</b>	<b>7"</b>	<b>20#</b>	<b>4700'</b>	<b>500</b>	<b>2000'</b>

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 *M. J. Meison* Title **District Superintendent** Date **1/2/70**

(This space for State Use)

APPROVED BY *[Signature]* TITLE \_\_\_\_\_ DATE **1/2/70**

CONDITIONS OF APPROVAL, IF ANY: