

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)

30-025-31733

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

A - 2614

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work:

DRILL ☒

RE-ENTER ☐

DEEPEN ☐

PLUG BACK ☐

b. Type of Well:

OIL
WELL ☐

GAS
WELL ☐

OTHER WATER WELL

SINGLE
ZONE ☒

MULTIPLE
ZONE ☐

7. Lease Name or Unit Agreement Name

SOUTH EUNICE WATER SUPPLY

2. Name of Operator

Marathon Oil Company *attn: water Service*

8. Well No.

1

3. Address of Operator

P.O. Box 552 Midland, Tx. 79702

9. Pool name or Wildcat *undesignated*
EUNICE, SOUTH *San Andres*

4. Well Location

Unit Letter J : 1392 Feet From The SOUTH Line and 1818 Feet From The EAST Line

Section 26

Township 22 - S

Range 36 - E

NMPM LEA

County

10. Proposed Depth

4700'

11. Formation

SAN ANDRES

12. Rotary or C.T.

ROTARY

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

3478.3' G.L.

14. Kind & Status Plug. Bond

BLANKET CURRENT

15. Drilling Contractor

UNKNOWN

16. Approx. Date Work will start

OCT. 15, 1992

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
20"	16"	CONDUCTOR	40'	REDI - MIX	CIRCULATE
14-3/4"	11-3/4"	42	450'	350	CIRCULATE
11"	8-5/8"	32 & 36	4700'	1165	CIRCULATE

THIS WELL IS INTENDED AS A WATER SUPPLY WELL TO PROVIDE A PORTION OF THE REQUIRED WATER FOR A SECONDARY RECOVERY PROGRAM IN THE SOUTH EUNICE SEVEN RIVERS - QUEEN UNIT.

THE BLOWOUT PREVENTION EQUIPMENT FOR THIS WELL IS AS FOLLOWS: SURFACE HOLE - 16-3/4", 2M ANNULAR PREVENTER. PRODUCTION HOLE - 13-5/8", 3M ANNULAR WITH 3M DUAL RAMS AND MUD CROSS.

H2S DETECTION AND BREATHING EQUIPMENT SHALL BE INSTALLED BY 1000'.

ALL CASING AND CEMENTING OPERATIONS SHALL BE PERFORMED IN ACCORDANCE WITH STATE RULES.

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

Cecil T. Pearce

TITLE

DRILLING SUPERINTENDENT

DATE

TYPE OR PRINT NAME

CECIL T. PEARCE

TELEPHONE NO. 915-682-1626

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

SEP 14 '92

CONDITIONS OF APPROVAL, IF ANY:

OIL CONSERVATION DIVISION

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DISTRICT III

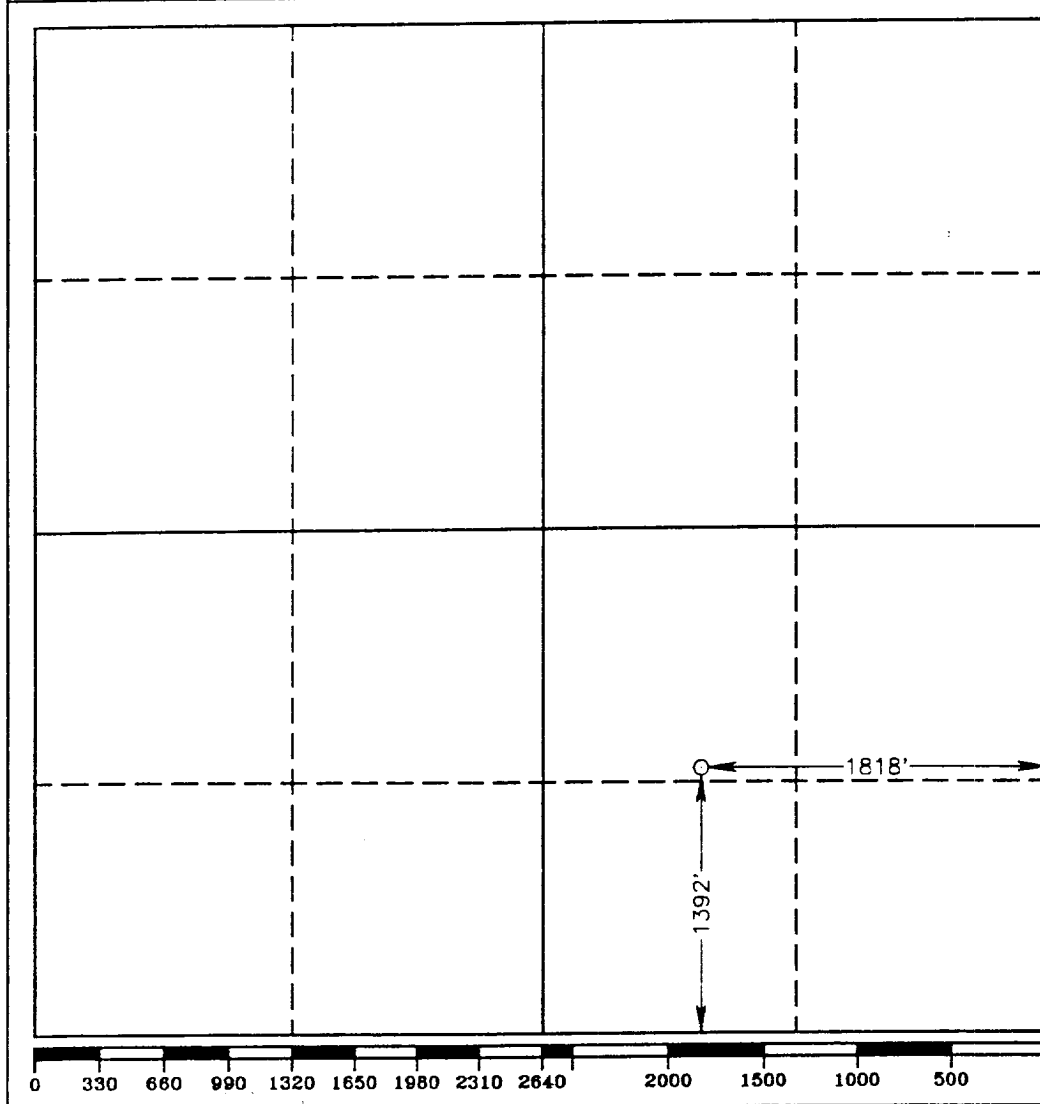
1000 Rio Brazos Rd., Artec, NM 87410

WELL LOCATION AND ACREAGE DEDICATION PLAT

All Distances must be from the outer boundaries of the section

Operator MARATHON OIL CO.			Lease SOUTH EUNICE WATER SUPPLY		Well No. 1
Unit Letter J	Section 26	Township 22 SOUTH	Range 36 EAST NMPM	County LEA	
Actual Footage Location of Well: 1392 feet from the SOUTH line and 1818 feet from the EAST line					
Ground Level Elev. 3478.3'	Producing Formation San Andres		Pool <i>Undesignated</i> Eunice, South	Dedicated Acreage: Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
 2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
 3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?
☐ Yes ☐ No If answer is "yes" type of consolidation _____
- If answer is "no" list of owners and tract descriptions which have actually been consolidated. (Use reverse side of this form necessary. _____)
- No allowable will be assigned to the well unit all interests have been consolidated (by communitization, unitization, forced-pooling, otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



OPERATOR CERTIFICATION

I hereby certify the the information contained herein is true and complete to the best of my knowledge and belief.

Signature
Cecil T. Pearce
Printed Name
Cecil T. Pearce
Position
Drilling Supt.
Company
Marathon Oil Company
Date

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed
AUGUST 27, 1992
Signature & Seal of Professional Surveyor
[Signature]
Certified No. *[Signature]*
JOHN W. WEST, 676
RONALD J. EIDSON, 3239
GARY L. JONES, 7977
EDWARD J. EIDSON, 215

173
EX-100 72-93

RECEIVED
SEP 10 1992
OCD HOBBS OFFICE