SUBMIT IN TRIPLICATE\* truction e side)

Form approved. Budget Bureau No. 42-R1425.

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UNIT PARTMENT	OF THE	INTERIOR	มสิง. ซฟสติสโด
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	اس کوری		, <sub>~</sub> _	مسترجسان	1/
5.		ESIGNATION			
1	NM-18	631			

GEOLOGICAL SURVEYOBBS, NEW MEXICO 88240			5. LEASE DESIGNATION NM-18631	N AND SERIAL NO.	
APPLICATION FOR PER	MIT TO DRILL, D	EEPEN, OR PLUG		6. IF INDIAN, ALLOTTI	EE OR TRIBE NAME
1a. TYPE OF WORK	DEEPEN [	PLUG BA	.ck 🗆	7. UNIT AGREEMENT	NAME
b. TYPE OF WELL		SINGLE MULTI	PLE [	6 <b>3</b> 43	
WELL X WELL O	THER	ZONE ZONE	· · · ·	8. FARM OR LEASE NA Jackson Fede	
2. NAME OF OPERATOR				Jackson rede	
Exxon Corporation				9. WELL NO.	
3. ADDRESS OF OPERATOR				4	
Box 1600, Midland, Texas	Wildcat Wildcat				
At surface	sally and in accordance with	any state requirements.			
660' FNL and 1980'	FWL of Section	(NE NW)		11. SEC., T., R., M., OR AND SURVEY OR A	ARBA YALL
At proposed prod. zone				Sec. 35-T24S-R32E	
14. DISTANCE IN MILES AND DIRECTION F	12. COUNTY OR PARIS	H 13. STATE			
27.2 miles W/NW of	Jal			Lea	N.M.
15. DISTANCE FROM PROPUSED* LOCATION TO NEAREST  66		16. NO. OF ACRES IN LEASE		NO. OF ACRES ASSIGNED TO THIS WELL	
PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. unit line, if an	660'	1200			
18. DISTANCE FROM PROPOSED LOCATION* 19. PROPOSED DEPTH 20.		20. ROTA	OTARY OR CABLE TOOLS		
TO NEAREST WELL, DRILLING, COMPLETED, 2900 NE OR APPLIED FOR, ON THIS LEASE, FT.		5200'	Rotary		
21. ELEVATIONS (Show whether DF, RT, GR		<u> </u>		22. APPROX. DATE W	ORK WILL START*
3547.1'	GR			Upon Approva	1
23.	PROPOSED CASING	AND CEMENTING PROGR	AM	_ <del></del>	
SIZE OF HOLE SIZE OF CAS	BING WEIGHT PER FOO	SETTING DEPTH		QUANTITY OF CEMENT	
111/2/4 8 5/8"	24#	600'	350	sx-TOC-Surfac	e
7 7/011   5 1/011	11.11	51001	1 (00	a maa m.	• • • •

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. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any. (This space for Federal or State office use) APPROVAL DATE CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

APR 11 1985

O.C.D. HORBS OFFICE