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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

JUL 17 10 45 AM '69

5A. Indicate Type of Lease	
STATE <input type="checkbox"/>	FEE <input checked="" type="checkbox"/>

5. State Oil & Gas Lease No.

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL <input type="checkbox"/> DEEPEN <input checked="" type="checkbox"/> PLUG BACK <input type="checkbox"/> 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 Liberty	
2. Name of Operator Mobil Oil Corporation		9. Well No. 2	
3. Address of Operator P. O. Box 633, Midland, Texas 79701		10. Field and Pool, or Wildcat Langlie-Mattix	
4. Location of Well UNIT LETTER <u>E</u> LOCATED <u>1650</u> FEET FROM THE <u>North</u> LINE AND <u>660</u> FEET FROM THE <u>West</u> LINE OF SEC. <u>3</u> TWP. <u>25-S</u> RGE. <u>37-E</u> NMPM		12. County Lea	
19. Proposed Depth 3675		19A. Formation Queen	20. Rotary or C.T. Rotary
21. Elevations (Show whether DF, RT etc.) DF - 3170'	21A. Kind & Status Plug. Bond On File	21B. Drilling Contractor --	22. Approx. Date Work will start 7-21-69

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
13"	10-3/4"	42#	244	150	Surf.
9"	7"	24#	3171	350	--

This well was originally drilled to a total depth of 3467 ft and completed 5/19/38 as an oil well in the Queen formation through open hole 3171'-3467'. Permission is requested to deepen to 3675', stimulate with acid and complete in open hole 3171'-3675'.

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 A. D. Bond A. D. Bond Title Proration Staff Assistant Date July 16, 1969

(This space for State Use)

APPROVED BY [Signature] TITLE SUPERVISOR DATE JUL 18 1969

CONDITIONS OF APPROVAL, IF ANY: