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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-101
Revised 1-1-65

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 type="checkbox"/> PLUG BACK <input checked="" type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		8. Farm or Lease Name Saunders	
2. Name of Operator Burleson & Huff		9. Well No. 2	
3. Address of Operator P. O. Box 935, Midland, Texas 79701		10. Field and Pool, or Wildcat Langlie-Mattix	
4. Location of Well UNIT LETTER F LOCATED 1650 FEET FROM THE North LINE AND 1650 FEET FROM THE West LINE OF SEC. 28 TWP. 25-S RGE. 37-E NMPM		12. County Lea	
21. Elevations (Show whether DF, RT, etc.) 3017		18. Proposed Depth P. B. 3600'	19A. Formation Queen
21A. Kind & Status Plug. Bond State Wide	21B. Drilling Contractor -	20. Rotary or C.T. Plugging Unit	
22. Approx. Date Work will start June 24, 1973			

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
10"	13-3/8"	54	913	500	circulated
12-1/2"	9-5/8"	36	3650	1800	circ. to top

OWWO - Sinclair Lashart No. 1 Devonian plugged well.

Drill cement plug in 9-5/8" casing and clean out to 3600'. Set C. I. B. P. @ 3600' with 2 sx. cement and run logs. Perf. Queen section and acidize and test.

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 *[Signature]* Title **Partner** Date **June 4, 1973**
(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: