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SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION							Form C-101 Revised 1-1-	65	$P = \mathbf{o}$		
FILE										Aype of Lea		
U.S.G.S.									STATE		.se .20 [X]	
LAND OFFICE										& Gas Lease		
OF ERATOR										0 040 20400	. 110.	
									mm	mm	mm	
APPLICATI	ON FOR PE	RMIT TO	DRILL	. DEEPE	N. C	R PLUG B	ACK					
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK 18. Type of Work									7. Unit Agreement Name			
DRILL [7		DEEPEN PLUG BACK									
b. Type of well			DEEP	.N [€.]			PLUG	BACK	8. Farm or Lease Name			
OTHES SINGLE MULTIPLE ZONE ZONE								Knight				
2. Name of Operator									9. Well No.			
George L. Buckles	Company								6			
3. Address of Operator										10. Field and Pool, or Wildcat		
P. O. Box 145, Monahans, Texas 79750										Langlie-Mattix		
4. Location of Well	TER P	. 00	ATED	1315			ast		TITITI	THE THE	mm	
	ER P LOCATED 1315				_ FE							
AND 1315	_{м тне} South) Lin	E OF SEC	. 21	τw		RGE. 37	■E NMPM				
			7777	111111	TT	77777	TTÎÎ	ŤĨIII	12. County	////	HHH	
				///////					Lea			
		77777	444	HHH	14	HHH	<i>HHH</i>	411111	111111	Hhm	++++++	
		11111	1111	11111	19	. Proposed De	epth 1	9A. Formatio	J	20. Rotary o	or C.T.	
					3	36 40		Queer	ì	Cable	Tool	
21. Elevations (Show whether Di	F, RT, etc.)			Plug. Bond		B. Drilling Co			22. Approx	. Date Work v	vill start	
3220 Ground		Blanke	t Ac	ave	€ئا	orge L. E	luckles	Co., Lt	i Upo	on Approv	/al	
23.		Р	ROPOSE	D CASING A	AND (CEMENT PRO	GRAM					
SIZE OF HOLE	SIZE OF CASING		WEIGHT PER FOO		ОТ	SETTING	DEPTH	DEPTH SACKS OF		EST.	EST, TOP	
No Change												
	1	l	!		I			-				
Mayo on achie to il			91	•		4.7						
Move on cable tool	ng ana ce	eepen we	eli apy	roxi at	ely	100 feet	to a nev	w total de	epth of 30	40'.		
									4 \ /	<u></u>		
								- /) -	12-6	9		
								·	A CALCAGORDA COM	•		
I ABOVE SPACE DESCRIBE PE VE ZONE, GIVE BLOWOUT PREVENT	ROPOSED PRO	GRAM: IF P	ROPOSAL	IS TO DEEPER	N OR	PLUG BACK, GI	VE DATA ON	PRESENT PRO	DUCTIVE ZONE	AND BRODGER	NEW PROPUS	
										WMD PROPOSEL	NEW PRODUC	
nereby certify that the informati	on above is tru	ie and compl	lete to th	e best of my	kno	wledge and be	lief.					
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(This space for	State Use)											
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ONDITIONS OF APPROVAL, IF	ANY:	1							~ 1 ~ 1 1	- 77 3	<u> </u>	
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