		<u> </u>			3	o Ox	25-28626	
DISTRIBUTION NEW MEXICO OIL CONSERVATION COMMISSION						Form C-101 Revised 1-1-65		
						5A. Indicate Type of Lease		
FILE U.S.G.S.	+					STATE	FEE X	
LAND OFFICE	+				5	, State Oil	6 Gas Lease No.	
OPERATOR	+							
APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK								
1a. Type of Work						7. Unit Agree	ement Name	
DRILL X		DEEPEN	Р	LUG BA	аск 🔲 📙	. Farm or L		
b. Type of Well	Type of Well						Cities Thomas	
WELL WELL	WELL A WELL OTHER ZONE ZONE ZONE						9, Well No.	
2. Name of Operator						5		
Doyle Hartman 3. Address of Operator						10. Field and Pocl, or Wildcat		
Post Office Box 10426, Midland, Texas 79702						Langlie Mattix		
4. Location of Well UNIT LETTER A LOCATED 990 FEET FROM THE North LINE						<u>YUUUUUUUUUUUUUUUUUUUUUUUUUUUUUUUUUUUU</u>		
UNIT LETTE	LOC	······································				111111		
AND 990 FEET FROM	THE East LIN	E OF SEC. 19 T	WP. 245 RGE	<u>. 37E</u>	NMPM	11111	MMMM,	
	///////////////////////////////////////	///////////////////////////////////////		IIII.	IIIIII	12. County		
		<i>††††††††††</i>		HH	HHHH	Lea	illillillinn	
///////////////////////////////////////	titttittitti				//////	//////	://///////////////////////////////////	
	*******	HHHHHH	9. Proposed Depth		A. Formation	111111	20, Hetary or C.T.	
			3750	Sev	ven-Rive	rs Ouee	n Rotary	
21. Elevations (Show whether DF,	RT, etc.) 21A. Kind	& Status Plug. Bond	1B. Drilling Contro				. Date Work will start	
3299.3 G.L.	Multi-w	ell Approved	Not selecte	ed		Mar	<u>ch 1984</u>	
23.	P	ROPOSED CASING AND	CEMENT PROGR	АМ				
	SIZE OF CASING	WEIGHT PER FOOT	SETTING DE	ртн	SACKS OF	CEMENT	EST. TOP	
SIZE OF HOLE	9-5/8	36.0	400				Surface	
<u> </u>	97	23.0	3750				Surface	
	ttix (Seven-Riv icipated to occ face pipe throu	vers Queen) oil cur at an estim ugh the running ouble ram BOP s the proposed we	producer, w ated subsea of the prod ystem.	vith (deptl luctio	the top h of -27 on casin	of the O'. Fra g, the y	"Committee om the well will	
APPROVAL PERMIT E UNLESS VE 20ME, GIVE BLOWOUT PREVENTER PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT P						IRES KILLIN <mark>G U</mark>		
I hereby certify that the informatic		plete to the be st of my k	npwledge and belie	f.		<u> </u>		
signed Larry Q.)					D	arc <u>Feb</u>	ruary 20, 1984	
(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON					FEB 27 1984			
APPROVED BY DISTR	CI I SUPERVISOR	TITLE			D	ATE		
CONDITIONS OF APPROVAL, IF	ANY:							



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