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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION
OFFICE O. C. C.
JUL 23 10 48 AM '68

Form C-101
Revised 1-1-65

5A. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
5. State Oil & Gas Lease No. L129
7. Unit Agreement Name
8. Farm or Lease Name New Mexico 'Q' State
9. Well No. #2
10. Field and Pool, or Wildcat Undesignated
12. County Lea
19. Proposed Depth 9950
19A. Formation Pennsylvanian
20. Rotary or C.T. Rotary
21. Elevations (Show whether DF, RT, etc.)
21A. Kind & Status Plug. Bond Active
21B. Drilling Contractor Cactus Drilg. Corp.
22. Approx. Date Work will start July 24, 1968

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK			
1a. Type of Work b. Type of Well DRILL <input checked="" type="checkbox"/> DEEPEN <input 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"/>			
2. Name of Operator MIDWEST OIL CORPORATION			
3. Address of Operator 1500 WILCO BLDG., MIDLAND, TEXAS 79701			
4. Location of Well UNIT LETTER E LOCATED 1980 FEET FROM THE North LINE AND 660 FEET FROM THE West LINE OF SEC. 36 TWP. 10-S RGE. 33-E NMPM			
23.			

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
15"	11-3/4	31.2#	320	350	Circ.
11"	8-5/8	24 & 32#	4100	450	
7-7/8"	5-1/2	17#	9950	350	

NOT VALID
30 DAYS UNLESS
DRILLING COMMENCED,
EXPIRE: **Oct 23, 1968**

PRIOR TO RUNNING 11 3/4"
CASING.

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 **Carolyn Turner** Title **PRODUCTION CLERK** Date **JULY 22, 1968**

(This space for State Use)

APPROVED BY **John W. Runyan** TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: