Leone No

NM-06767

All sections of this form must be filled out completely for alloable on new and recompleted walls.

Fill out only Sections I. II, III, and VI for changes of own well name or number, or transporter, or other such change of conditions.

completed wells.

Separate Forms C-104 must be filled for each pool in multip

STATE OF HEW MEXICO DEPARTMENT OIL CONSERVATION DIVIS ON P. O. BOX 2088 FIRT MINUTION SANTA FE, NEW MEXICO 87501 7 BANTAPE LAND DEFICE REQUEST FOR ALLOWABLE OIL TRANSPURTER AUTHORIZATION TO TRANSPOIET PELDAND NATURAL GAS OPERATOR JUN -4 1987 (perutor BARBER OIL, INC. Ad tress O. C. D. P. O. Box 1658 Carlsbad, NM 88221 ARTESIA, OFFICIER (Plea Ferson(s) for living (Check proper box) Change in Transporter of: X Dry Cos 011 Condensate Casinghead Gas Clange in Ownership It change of ownership give name and address of previous owner ___ IL DESCRIPTION OF WELL AND LEASE Kind of Lease ell No. Pool Name, Including Formation State, Federal or Fee Federal 10 North Hackberry-Yates/7 Rivers LeBow Federal Location 660 Feet From The __ 990 Feet From The South Line and Unit Letter , NMPM, 33€ Eddy 19S Range Township Line of Section 25 IL DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) or Condensate None of Authorized Transporter of OII [X P. O. Box 1183 Houston, TX 77251
Address (Give address to which approved copy of this form is to be sent) Permion (EN. 9 / 1 /87) The Permian Corp. None of Authorized Transporter of Casinghead Gas or Dry Gas When Is gas actually connected? NONE Rqe. TTWP. Sec. Unit If well produces oil or liquids, give location of tanks. I ! 25 ; 33E ; 19S If this production is commingled with that from any other lease or pool, give commingling order number: Sane Hesty, Diff. He Y. COMPLETION DATA Plug Back New Well Workever Deepen Gas Well Oil Well Designate Type of Completion - (X) P.B.T.D. Total Depth Date Compl. Ready to Prod. Date Spudded Tubing Depth Top Oil/Gas Pay 'ame of Producing Formation Elevations (DF, RAB, RT, GR, etc.) Depth Casing Stice Ferforations TUBING, CASING, AND CEMENTING RECORD ACKS CEMENT CASING & TUBING SIZE TD-3 HOLE SIZE -82 LT: MAC (Test must be after recovery of total volume of load oil and must be equal to or exceed top alable for this depth or be for full 24 hours) TEST DATA AND REQUEST FOR ALLOWABLE Producing Method (Flow, pump, gas lift, etc.) OIL WELL Date of Test Cate First New C. Han To Tanks Choke Size Casing Pressure Tubing Fressure Length of Test Gas - MCF Water - Bbls. OII - Bble. Actual Prod. During Test Gravity of Condensate GAS WELL Bble. Condensate/MMCF Length of Test Actual Frod. Test-MCF/D Choke Size Cosing Pressure (Shut-in) Tubing Pressure (shut-in) Leving Method (pitot, back pr.) OIL CONSERVATION DIVISION L CERTIFICATE OF COMPLIANCE JUN 1 0 1987 I hereby certify that the rules and regulations of the Oil Conservation Division have been compiled with and that the information given above is true and complete to the best of my knowledge and belief. APPROVED. Channel Signed by tas A. Clements BY. Supervisor District | TITLE __ BARBER OIL, INC. This form is to be filed in compliance with nunct ties, If this is a request for allowable for a newly dillied or deepen well, this form must be accompanied by a tabulation of the deviations taken on the well in accordance with AULK 111. (Signature)

PRESIDENT

5/27/87

(Date)