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PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  
SEP 20 '89

Form C-104  
Supersedes Old C-104 and C-  
Effective 1-1-65

O. C. D.  
ARTESIA, OFFICE

Operator U - Ritch Operating Company	
Address 511 West Ohio Bldg. Ste. 308, Midland, Texas 79701	
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Vasquez	Well No. 1	Pool Name, Including Formation Cass Draw ( Delaware )	Kind of Lease State, Federal or Fee	Lease No. Fee
Location Unit Letter D ; 480 Feet From The North Line and 950 Feet From The West				
Line of Section 13 Township 23S Range 27E , NMPM, Eddy County County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

SCURLOCK PERMIAN CORP EFF 9-1-91

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 3119, Midland, Texas 79702					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> None	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 13	Twp. 23S	Rge. 27E	Is gas actually connected? No	When

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well XXX	Gas Well	New Well XXX	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'
Date Spudded 4/17/89	Date Compl. Ready to Prod. 8/08/89	Total Depth 2355'	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 3091.7'	Name of Producing Formation Delaware (Ramsey Sd.)	Top Oil/Gas Pay 2347' 2336'	Tubing Depth 2353'					
Perforations Open Hole from 2336' - 2355'			Depth Casing Shoe 2336'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE 12 1/2" 8"	CASING & TUBING SIZE 9 5/8" 4 1/2" 2 3/8"	DEPTH SET 403' 2336' 2353'	SACKS CEMENT 150 sx Class C 2% C 300 sx Class C " "
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V. TEST DATA AND REQUEST FOR ALLOWABLE  
OIL WELL

(Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 8/19/89	Date of Test 8/19/89	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure -----	Casing Pressure -----	Choke Size -----
Actual Prod. During Test 40 bbls.	Oil - Bbls. 10	Water - Bbls. 30	Gas - MCF 2

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size

CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Quinn W. C. Ritchie  
(Signature)  
Partner - U-Ritch Operating Company  
(Title)

September 19, 1989  
(Date)

OIL CONSERVATION COMMISSION

APPROVED SEP 26 1989, 19

BY ORIGINAL SIGNED BY  
MIKE WILLIAMS  
TITLE SUPERVISOR, DISTRICT II

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviated tests taken on the well in accordance with RULE 111.

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

Fill out only Sections I, II, III, and VI for changes of owner well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiple.