

OIL CONSERVATION DIVISION

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator RB Operating Company		Well API No. 30-015-26356
Address 2412 N. Grandview, Suite 201, Odessa, Texas 79761		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> <input type="checkbox"/> Other (Please explain) JUN 18 '90 Recompletion <input type="checkbox"/> Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Carrasco "14"	Well No. 3	Pool Name, Including Formation E. Loving (Delaware)	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter H : 1980 Feet From The North Line and 560 Feet From The East Line Section 14 Township 23S Range 28E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Box 1183, Houston, Texas 77001					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas	Address (Give address to which approved copy of this form is to be sent) Box 1492, El Paso, Texas 79978					
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 14	Twp. 23S	Rge. 28E	Is gas actually connected? Yes	When? 6-18-90

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 X	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 5-5-90	Date Compl. Ready to Prod. 5-31-90		Total Depth 6330		P.B.T.D. 6280			
Elevations (DF, RKB, RT, GR, etc.) 2964 GR	Name of Producing Formation Delaware		Top Oil/Gas Pay 6112		Tubing Depth 6096			
Perforations 6112-52					Depth Casing Shoe 6330			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		539		450			
7-7/8"	5-1/2"		6330		1350			
	2-7/8"		6096'		Post ID-2 6-22-90 comp 4 B13			

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 Tank 5-31-90	Date of Test 6-4-90	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24	Tubing Pressure 300	Casing Pressure 1200	Choke Size 22/64
Actual Prod. During Test 186	Oil - Bbls. 186	Water - Bbls. 97	Gas - MCF 145

GAS WELL

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

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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

Signature
F. D. Schoch Area Manager
Printed Name
6-15-90 (915) 362-6302
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUN 19 1990

By ORIGINAL SIGNED BY
MIKE WILLIAMS
Title SUPERVISOR, DISTRICT II

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- All sections of this form must be filled out for allowable on new and recompleted wells.