

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator P & P Producing, Inc.		Well API No. 300392283100
Address P.O. Box 3178, Midland, TX 79702-3178		
Reason(s) for Filing (Check proper box) ☐ Other (Please explain)		
New Well ☐	Change is Transporter of:	
Recompletion ☐	Oil ☐ Dry Gas ☐	
Change in Operator ☒	Casinghead Gas ☐ Condensate ☐	Effective 11/1/93
If change of operator give name and address of previous operator Graham Royalty, Ltd.		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Florance	Well No. 9	Pool Name, Including Formation West Lindrith-Gallup/Dakota	Kind of Lease State, Federal or Fed FED	Lease No. 080565
Location				
Unit Letter P	1000	Feet From The South Line and 1000	Feet From The East Line	
Section 5	Township 25N	Range 3W	NMPM, Rio Arriba County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Giant Refining Co.	Address (Give address to which approved copy of this form is to be sent) 23733 N. Scottsdale Rd., Scottsdale, AZ 85255					
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, TX 79978					
Well produces oil or liquids, location of tanks	Unit P	Sec. 5	Twp. 25N	Rge. 3W	Is gas actually connected? Yes	When? Unknown
If 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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res v	Drill Res v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE
OIL WELL (Test must be after recovery of total volume of lost 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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size 00T2 01382
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF 00T2 01382

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/M-MCF	Gravity of Condensate
Testing Method (pump, 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.

Larry R. Boren
Signature
Larry R. Boren Manager/Operations Accounting
Printed Name Title
Date **9/29/93** Telephone No. **915-686-4062**

OIL CONSERVATION DIVISION

Date Approved **NOV 18 1993**

By [Signature]
Title **SUPERVISOR DISTRICT #3**

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

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.