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connate District Office

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Lox 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

(1017) III (10 Filo Brazos Rd., Aziec, NM 87410

TRICE II Trawer DD, Anesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

	711200	TO TRAN	NSPOR	T OIL	AND NATURAL GA	S Well A	DI No			
GLOX										
	nnon Oil & Gas, Inc.					30-045-25420				
2240A Forest Park	Blvd.	, Fort	t Wort	h,	Texas 76110 Other (Please expla					
m.) for Filing (Check proper box) Well		Change in T	Fransporter (of:	Outer () tours aspec	,				
manalist Co	Oil		Dry Gas							
e a Seculor X	Casinghead		Condensale							
go of operator give name thress of previous operator M.	J. Br	annon	2240)A F	orest Park Bly	zd., Fo	ort Wor	th, Te	xas, 76	
DESCRIPTION OF WELL		Well No.	Pool Name	Includia	ng Formation	Kind o	of Lease	L	zase No.	
:Name Federal 28					Basin Dakota X			SANK Federal OK ROX SF 078309		
hon						90 Fe	et From The	West	Line	
Unit Letter E	18	50	Feet From T	The	orth Line and 79	<u> </u>	et From the			
Section 28 Townshi	<u>p</u> 25	N	Range	9 W	, NMPM, Sa	in Juai	<u>n</u>		County	
DESIGNATION OF TRAN	SPORTE	R OF OI	LAND	NATU	RAL GAS		leasu of this G	orm is to he se	ent)	
Authorized Transporter of Oil or Condensate					Address (Give address to which approved copy of this form is to be sent) P.O.Box 1183, Houston, TX 77251					
PERMIAN 13. horized Transporter of Casin	head Gas or Dry Gas 📉			Address (Give address to wh	copy of this fo	opy of this form is to be sent)				
EL PASO NATURAL G	AS				ngton, NM 87499					
reduces oil or liquids,	Unit I	S∞. 28	1wp. 25N!	Rge. 9W	Is gas actually connected? Yes	When	ne 1983	3		
eation of tanks. production is commingled with that		1			L					
COMPLETION DATA	,					1 2	Dive Dack	Same Res'v	Diff Res'v	
and the second s	(Y)	Oil Well	Gas	Well	New Well Workover	Deepen	Ling Pace			
esignate Type of Completion	· (A)	nl. Ready to	Prod.		Total Depth	l	P.B.T.D.	. L		
Spadded	Date Compl. Ready to Prod.			The state of the s		Tuking Death				
tions (DF, RKB, RT, GR, etc.) Name of Prod		roducing Fo	rmation		Top Oil/Gas Pay		Tubing Depth			
3(1,111)	_L						Depth Casin	ng Shoe		
dets#18			·		2000		<u> </u>			
		TUBING, CASING AND			DEPTH SET		SACKS CEMENT			
HOLE SIZE	CASING & TUBING SIZE			<u> </u>						
The state of the s										
								_ 		
The property of the property o	er rop.	ALLOW!	ABLE							
TEST DATA AND REQUE WELL (Test must be after	recovery of t	otal volume	of load oil o	and mus	be equal to or exceed top all	owable for th	is depth or be	for full 24 ho	ws.)	
First New Oil Run To Tank	Date of To	c si			Producing Method (Flow, p	ump, gas tyt,	EIC.)			
	Tubing Pr	Tubing Pressure			Casing Pressure		JOHNENE			
th of Test	1 doing 11					 	Gas- MCF		- U	
ial Prod. During Test	Oil - Bbls	i.			Water - Bbls.	u	APR	02 1990		
							<u> </u>		.11.7	
AS WELL	Length of	ear. T			Bbls. Condensate/MMCF		Veldright	Sold Street	1 7	
ial Prod. Test - MCF/D	Length of	Liest					Choke Siz	HST. 3	<u> </u>	
ng Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)		Choke Size				
and comment	CATEO	E COM	DITANC	CE.		VICE D'	/ATION	חוייוכו	ΟN	
OPERATOR CERTIFI	untations of th	ie Oil Corre	rvauon		OIL CO	49EH /				
Pereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above				APR 0 2 1990						
is true and complete to the best of m	y knowledge	ANG DENEE.			Date Approve	⊎U		Λ		
7: be 12					Ву	3.	<u> ۲</u> ۱ (Then!		
Money of Danier		Pot	Engr		by	SUPE	RVISOR	DISTRIC	7 #3	
Richard Brannon		ret.		•	II	· •			· • •	
Table of Name			Title	-	II Title					
Printed Name 3/28/90	{	817/92	Title 4-869 Icphone No		litle					

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
- 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-101 must be filed for each pxol in multiply completed wells.