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Appropriate District Office
DISTRICT I
P.O. Box 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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| perator  | - 10   | J INAIN                   | or Orth OIL         |                           |                                    | Well A                                 |                                       |                       |               |  |
|--|--|---------------------------|---------------------|---------------------------|------------------------------------|--|---------------------------------------|-----------------------|---------------|--|
| Oryx Energy Company  |  |                           |                     |                           |                                    | 30-                                    | 045-24365                             | 5                     |               |  |
| Sdress   | nd Tava  | as 797                    | 02                  |                           |                                    |  |                                       |                       |               |  |
| P. O. Box 1861, Midla  | nu, ieko   | 13/                       | <u> </u>            | X Other                   | (Please explai                     | n)                                     |                                       |                       |               |  |
| ew Well  | c  | ~                         | nasporter of:       | -<br>Fffact               | ive11-1-                           | .90                                    |                                       |                       |               |  |
| accompletion   | Oil  | _                         | ry Cas 🔲            |                           | Condens                            |  | nsporter                              |                       |               |  |
| hange in Operator  | Casinghead (   | Gas   C                   | ondensate X         |                           |                                    |  | - 1                                   |                       |               |  |
| change of operator give name d address of previous operator  |  |                           |                     |                           |                                    |  |                                       |                       |               |  |
| DESCRIPTION OF WELL  | AND LEAS   | SE                        |                     |                           |                                    | P!- a                                  | f Loos                                | Fede                  | ral           |  |
| ease Name  | Vell No., Po   | ool Name, Including       |                     |                           |                                    | Kind of Lease<br>State, Federal or Fee |                                       | NM047                 |               |  |
| New Mexico Federal -N  | <u>-</u>   | 3E                        | <u>Basin Dak</u>    |                           |                                    |  |                                       |                       | <del></del>   |  |
| Continue D   | . 1  | 000 <sub>F</sub>          | eet From The Nor    | th Line                   | and112                             | 20F <b>∞</b>                           | t From The                            | West                  | Line          |  |
| UMI DAME!  |  | A1                        | 10 14               |                           | Car                                | n Juan                                 |                                       |                       | County        |  |
| Section 18 Township  | 30-  | N R                       | ange 12-W           | , NN                      | IPM, Sar                           | - Cuun                                 | <u></u> -                             |                       | _ CAUITY      |  |
| I. DESIGNATION OF TRAN   | SPORTER  | OF OIL                    | AND NATUR           | AL GAS                    |                                    |  |                                       |                       |               |  |
| iams of Authorized Transporter of Oil  |  | or Condensa               | <b>.</b> 🔼          | VOCILERE (CLIM            | address to wh                      |  |                                       |                       | ni)<br>5068   |  |
| Giant Refining Co.   | <del></del>  |                           |                     | P. U.                     | Box 9156  address to wh            | ich approved                           | copy of this for                      |                       |               |  |
| Name of Authorized Transporter of Casin<br>Sunterna Gas Process  | of Authorized Transporter of Cazinghead Gas or Dry Gas X |                           |                     |                           | ield, Ne                           | w Mexico                               | 8741                                  | 3                     |               |  |
| f well produces oil or liquids,  |  | Unit   Sec.   Twp.   Rge. |                     |                           | Is gas actually connected? When    |  |                                       | 7                     |               |  |
| ive location of tanks.   | <u>i Di</u>  | 18                        | 30N 12W             |                           | es                                 | l                                      | 4-23-81                               | <u> </u>              |               |  |
| this production is commingled with that  | from any othe  | r lease or po             | ol, give commingli  | ng order num              | mer:                               |  |                                       |                       |               |  |
| V. COMPLETION DATA  Designate Type of Completion   | - (X)  | Oil Well                  | Gas Well            | New Well                  | Workover                           | Deepen                                 | Plug Back                             | Same Res'v            | Diff Res'v    |  |
| Data Spudded   |  | l. Ready to F             | Prod.               | Total Depth               | L                                  |  | P.B.T.D.                              |                       |               |  |
| Elevations (DF, RKB, RT, GR, etc.)   | Name of Producing Formation                              |                           |                     | Top Oil/Gas Pay           |                                    |  | Tubing Depth                          |                       |               |  |
|  |  |                           |                     |                           | Depth Casing Shoe                  |  |                                       |                       |               |  |
| Perforations   |  |                           |                     |                           |                                    |  |                                       |                       |               |  |
|  | т  | UBING. (                  | CASING AND          | CEMENTI                   | NG RECOR                           | D                                      | · · · · · · · · · · · · · · · · · · · |                       |               |  |
| HOLE SIZE  |  | SING & TU                 |                     |                           | DEPTH SET                          |  | s                                     | ACKS CEM              | IENT          |  |
|  |  |                           |                     |                           |                                    |  | <del> </del>                          |                       |               |  |
|  | <del></del>  |                           |                     | -                         |                                    |  |                                       |                       |               |  |
|  | -  |                           |                     |                           |                                    |  |                                       |                       |               |  |
| V. TEST DATA AND REQUE   | ST FOR A   | LLOWA                     | BLE                 |                           |                                    | lowable for th                         | is depth or be f                      | or full 24 ho         | urs.)         |  |
| V. TEST DATA AND REQUE OIL WELL (Test must be after  |  |                           | f load oil and must | Producing N               | r exceed top at<br>lethod (Fiow, p | memp, gas lift,                        | etc.)                                 |                       |               |  |
| Date First New Oil Run To Tank   | Date of 1e   | Date of Test              |                     |                           | MERENVE                            |  |                                       | <u>n</u>              |               |  |
| Length of Test   | Tubing Pre   | Tubing Pressure           |                     |                           | Casing Cessure                     |  |                                       | Choke Size            |               |  |
|  | 1  |                           |                     | Water - Rhi               | DEC31                              | 1990                                   | Gas- MCF                              |                       |               |  |
| Actual Prod. During Test   | Oil - Bbls.  |                           |                     | 77 201 - 201              |                                    |  |                                       |                       |               |  |
|  |  |                           |                     | <del></del>               | IL CON                             | 1. DIA                                 |                                       |                       |               |  |
| GAS WELL Actual Prod. Test - MCF/D   | Length of  | Length of Test            |                     |                           | Bbis. Condensate Bist. 3           |  |                                       | Gravity of Condensate |               |  |
| Province a Long - State of Sta |  |                           |                     |                           | /Ph 1=1                            |  | Choke Size                            |                       |               |  |
| Testing Method (pilot, back pr.)   | Tubing Pressure (Shut-in)                                |                           |                     | Casing Pressure (Shut-in) |                                    |  | - Indeed Section 1                    |                       |               |  |
|  |  | 2001                      | TANCE               | ٦                         |                                    |  |                                       |                       |               |  |
| VI. OPERATOR CERTIFI   |  |                           |                     |                           | OIL CO                             | NSER\                                  | /ATION                                | DIVISI                | ON            |  |
| I hereby certify that the rules and regulations of the Oil Conservation  Division have been complied with and that the information given above   |  |                           |                     | DEC 3 1 1990              |                                    |  |                                       |                       |               |  |
| is true and complete to the best of m  | y knowledge :  | and belief.               |                     | Dat                       | te Approv                          | ed                                     |                                       |                       |               |  |
| $1 \cdot 1 \cdot$  | 12.  |                           |                     | By                        |                                    | ~                                      | ر در                                  | ~),                   | /             |  |
| y bus teres by a   |  |                           |                     |                           |                                    |  |                                       |                       | <del>-,</del> |  |
| <u>Maria I. Perez</u>  | Pro  | ration                    | <u>Analyst</u>      | <b>II</b>                 |                                    | SUP                                    | ERVISOR                               | DISTRIC               | CT #3         |  |
| Printed Name   | 915/688  | -0375                     | Title               | Titl                      | е                                  |  |                                       |                       |               |  |
| 12/21/90<br>Date   | 213/000  |                           | ephone No.          |                           |                                    |  |                                       |                       |               |  |
| Date   |  |                           | •                   |                           |                                    |  |                                       |                       |               |  |

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.

EMPLOYER METAL

TOP 12:0 SCAPACION