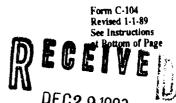
Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088



DISTRICT III

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

Santa Fe, New Mexico 87504-2088

000 Rio Brazos Rd., Aziec, NM 874	REQUEST FOR ALL C	WABLE AND AUTHOR	ZIZATIONI	5202 9 199,	_
		T OIL AND NATURAL (AS	OIL CON. [)11 '
perator				PI No. DIST 3	·
Texakoma 0il &	Gas Corporation 22°	521	30-0	45-29027	
dress					
	y, Suite 500, Dallas,	Texas 75240			
ason(s) for Filing (Check proper box		Other (Please ex	plain)		_
W Well X	Change in Transporter		,	SAPIUE	M
completion unge in Operator	Oil Dry Gas	X .	m'	ECELAE	IIII
unge of operator give name	Casinghead Gas Condensate		<u>- K '</u>		<u> </u>
address of previous operator			ПП	DEC2 2 1993	
DESCRIPTION OF WEL	I. AND LEASE		9	DECAM	f
use Name	D" Basin	Including Formation	Kook	IL CON UT	ease No.
xakoma Foothills "	D" Basin	(Fruitland Coal)	SXX.	Federal 1913	8576
alion					
Unit Letter K	: 1680 Feet From 1	The South Line and 149	5 Fe	et From The West	Line
Section 19 Town	ship 30N Range 1	2W , NMPM, S.	an Juan		County
DESCRIPTION OF THE PROPERTY OF					
DESIGNATION OF TRA	ANSPORTER OF OIL AND N	Address (Give address to	which approved	copy of this form is to be s	eni)
Litter	98/1915	NA	upproven	ه ده ده ده این این این این از در در در	-,
ne of Authorized Transporter of Car	inghead Gas or Dry Gas		which approved	copy of this form is to be s	ent)
xakoma Oil & Gas C	~ _			500, Dallas,	
ell produces oil or liquids,	Unit Sec. Twp.	Rge. Is gas actually connected?			
location of tanks.	<u>i i i i</u>	ves	i		
production is commingled with th	at from any other lease or pool, give on				
COMPLETION DATA				Y	L :
esignate Type of Completion	Oil Well Gas V		Deepen	Plug Back Same Res'v	Diff Res'v
Spudded		X Total Doorth		1 2272	_l
	Date Compi. Ready to Prod.	Total Depth		P.B.T.D.	
/ <u>02/93</u> tions (DF, RKB, RT, GR, etc.)	Name of Broducing Sourceion	2009 ¹ Top Oil/Gas Pay		1980'	
•	Name of Producing Formation	•		Tubing Depth 1917	
22(GR): 5828 (KB)	Fruitland Coal	1866'		Depth Casing Shoe	
38'-41'; 1867'-92'	; 1900-02'			1980'	
	TUBING, CASING	AND CEMENTING RECO	ORD	. 1700	
HOLE SIZE	CASING & TUBING SIZE			SACKS CEA	MENT
-1/4:	8-5/8"/24#	179		130 sx	
7/8"	5-1/2"/15.5#	1980		310 sx	
95	2-3/8"/4.7	1917		NA.	
				<u> </u>	
TEST DATA AND REQUI	EST FOR ALLOWABLE				1
WELL (Test must be after First New Oil Run To Tank	recovery of total volume of load oil as	Producing Method (Flow)	allowable for the	is depth or be for full 24 hi	m/3.)
'A	Date of Test	PROBLEMS MEGAGE (Plow)	hauh, Laz (6; .	 /	
th of Test	Tubing Pressure	Casing Pressure	XV	Choke Size	,
(Deed Deed or		181 a 844 a.	(- (-)	Gas- MCF	<u>/</u>
l Prod. During Test	Oil - Bbls.	Water - Bbls.	i ju	Gas- MCF	- Kiel
		1 , 100	1 P 6 /2	11,	76-
S WELL I Prod. Test - MCF/D		IDAG OF ALL SALES	1.163	Gravity of Condensate	
ALL CAPABLE OF COME	Length of Test	Bbis. Condensate/MMCF	• •	CHEVITY OF COMMEMBER	. 1
Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in	- 	Chake Size	
a	-0- 1/-	1 / 2	_		
OPERATOR CERTIFI	CATE OF COMPLIANCE		<u> </u>	(ATION DIVID	ION!
servely certify that the rules and rep		OIL CO	NSERV	ATION DIVIS	ION
ivision have toen complied with a	d that the Wormstion fives shove				7 40
true and complete to the best of m	y thousings and belief	Date Appro	ved	JAN	- 3 19
	5/	= =====================================		_1 -	
		— By	るシン	Chan	
ennis <u>Cron</u> khite, F	P.E. Operating Engine	(1)	SHEEDWA	OR DISTRICT	•
inted Name	Title	Title	SUPERVIS	OR DISTRICT	y
12/21/93	214/701-9106				
nte	Telephone No.	_			

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.

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