State of New Mexico ergy, Minerals and Natural Resources Departs.

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

## **OIL CONSERVATION DIVISION** P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Benzon Rd., Azzec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator	_						Well	API No.			
Mims Texas Oil &	Gas Co.							Not Avai	<u>lable</u>		
7060 C Vala C+a	707	T.,1	ΟV	74106							
7060 S. Yale, Ste Research(s) for Filing (Check proper box)	. /0/,	luisa	, UK	/4136		et (Please explo					
New Well		Change is	Tracence	am ali		•	•	o +o ∩DV	/V		
Recompletion	Oil		Dry Ga		the	BIM. Mi	me Texa	e lo oki s Nil &	A Was a	enied by remains	
Change in Operator X	Casinghe	ad Gas			oper	ator of	this le	3 011 Q 850.	aas co.	r ema mis	
of change of operator give name and address of previous operator	x Energ	ıv Comp	anv.	P. O. I		, Midlan			,	<del></del>	
			411.5		30X 1001	, illululi	u, lexa	3 / 3/ 02		<del> </del>	
II. DESCRIPTION OF WELL Lesse Name	AND LEASE Well No.   Pool Name, Include				Ter						
Miller Federal	1 2 1 -				•	_	1	Kind of Lease State, Federal or Fee		Lease No. NM-046153-A	
Location		1	1 10111	<u>- 1011 31</u>	an Andre	S		<del></del>	IMM=U4	40123-A	
Unit LetterH	_ :	1980	Post Fre	ma The No	orth Lin	<b>and</b> 60	60	et From The	East	Line	
24	- · <u></u>		• • • • • • • • • • • • • • • • • • • •				·`	- 1 IVIII 1110 .			
Section 34 Townshi	ip /-S	··	Range	31 <b>-</b> E	, N	MPM, Ch	aves			County	
III. DESIGNATION OF TRAN	TT GOGZ	TR OF O	II. ANI	NATTI	DAT. GAS						
Name of Authorized Transporter of Oil	OK 1 E	or Conde		NATO	Address (Give	e address to wi	hick approved	cours of this f	orm is to be s	end)	
Pride Pineline Limita	Pipeline Limited Partnership				Rox 2436, Abilene, Texas 79604						
Name of Authorized Transporter of Casin	ghead Gas		or Dry	Gas	Address (Give	e address to wi	ich approved	copy of this f	orm is to be s	ent)	
Oxy USA-Inc.	1 ** :-		1=	,	Box 2	7570, Ho	uston,	Texas 7	7227		
If well produces oil or liquids, give location of tanks.	Unit 1 D				Is gas actually connected? When			7			
if this production is commingled with that	from any of				ine order numb	<u> </u>					
IV. COMPLETION DATA											
Designate Type of Completion	- (X)	Oil Well	G	ies Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Spudded Date Con		pl. Ready to Prod.			Total Depth					
rvations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth			
Perforations	L			Depth Casing Shoe							
									,		
	-	TUBING, CASING AND				CEMENTING RECORD					
HOLE SIZE	CA	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT		
	<del> </del>						<u> </u>	<del> </del>		<del></del>	
	-							-		· · · · · · · · · · · · · · · · · · ·	
	†					<del></del>	<del></del>	<del> </del>	<del></del>		
V. TEST DATA AND REQUE	ST FOR	ALLOW.	ABLE				····				
OIL WELL (Test must be after t	<del>,</del>		of load o	il and must			<del></del>	<u>-</u>	or full 24 hou	P3.)	
Date First New Oil Run To Tank	Date of Te				Producing Me	thod (Fiow, pu	mp, gas lift, c	HC.)			
Length of Test	Tubing Pressure				Casing Pressure			Choke Size			
- -											
Actual Prod. During Test Oil - Bbls.			-		Water - Bbis.			Gas- MCF			
· · · · · · · · · · · · · · · · · · ·								<u> </u>	-,		
GAS WELL									<u> </u>		
Actual Prod. Test - MCF/D	d. Test - MCF/D Length of Test				Bbls. Conden	BIE/MMCF		Gravity of Condensate			
sting Method (pitot, back pr.) Tubing Pressure (Shut-in)					Casing Pressure (Shut-in)			Choke Size	Choke Size		
······································						(					
VI. OPERATOR CERTIFIC	ATE OF	COM	PLIAN	CE	1			<del></del>			
I hereby certify that the rules and regui	lations of the	Oil Conser	rvation	-	(	DIL CON	ISERV	ATION	DIVISIO	ON	
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					]]	OIL CON	v <sup>a</sup>	think of U	1300		
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Signature	Oryx E	nergy	Compa	nv	By_	<u>. 22</u>	ur al Sir Sur ur	vad by ja Tiburan	SET SEATE	J15	
Maria L. Perez	Prorat	ion An	alyst	<del></del>			Jan Brand	. ೯೩೮೮೫೫	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	915) 6	88-037	Title 5		Title					<del></del>	
Date			ephone N	0.							
			•		11						

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.

RECEIVED

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