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

State of New Mexico Energy, Minerals and Natural Resources Departme. 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 Brizos Rd., Aziec, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.	T	OTRAN	NSPO	RT OIL	TAN DNA	URAL GA	S Well A	DI No		
Openior Xeric Oil & Gas						_	Well A	ri 110.		
Address			70'	710						
P.O. Box 51311, Reason(s) for Filing (Check proper box)	Midian	.u , 1 ∧	7.5	710	Othe	r (Piease explai	ın)			
New Well	•	Change in 1								
Recompletion	Oil X Dry Cas — Camplead Gas Condensate —									
Change in Operator If change of operator give name	Canapaeso	<u> </u>	COLOCUL							
and address of previous operator	····				-				· · · · · · · · · · · · · · · · · · ·	
II. DESCRIPTION OF WELL	AND LEA	SE Well No	Pool Nar	ne. Includi	ing Formation Kind			of Lease No.		
Gulf State	1 Pearl (Q							e, Federal or Fee $E-314$		3143
Location Unit LetterE	1980 Feet From The North Line and 660 Feet From The Wes									Line
										County
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	SPORTEI XX	or Cooden	LAND	<u>NATU</u>	RAL GAS Address Goo	r THE ESS 10 WH	ich approved	copy of this fo	orm is to be see	nu)
Texaco Trading & Tr	-1 Λ Λ	rtatio	n `		P.O. I	3ox 556	8, Den	ver CO	80217	
Name of Authorized Transporter of Casing	thead Gas		or Dry C	A1	Address (Civi	e acticless to wh	uch approved	copy of this fo	orm is to be se	ಗ್ರ)
If well produces oil or liquids,	is gas actually connected? When ?									
give location of tanks.	Undit E	S ∞ . 36	19-S	34-E	No		i			
If this production is commingled with that IV. COMPLETION DATA	from any other	er lease or p	oooi, gove	commit	ng order numb	ær				
Designate Type of Completion	· (Y)	Oil Well	G	31 H c.	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Resiv
Date Spudded		Date Compl. Ready to Prod.			Total Depth		<u> </u>	P.B.T.D.	l	
·				45-4						
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Cas Pay			Tubing Depth		
Perforations					***·			Depth Casing Shoe		
	Т	UBING.	CASIN	GAND	CEMENTI	NG RECOR	D	1		· · · · · · · · · · · · · · · · · · ·
HOLE SIZE	HOLE SIZE CASING & TUBING SIZE				DERTH SET			SACKS CEMENT		
								 		
V. TEST DATA AND REQUES	T FOD A	11000	RIE							
				ىسەندەن	Ne kaman na pr	exceed top alio	imable for thi	s aepih or be l	for full 24 how	75)
Date First New Oil Run To Tank	Date of Test Producing Method (Flow, pump, gas lyt, etc.)									
Length of Test	Tubing Pressure				Casing Pressure			Choke Size		
Actual Prod. During Test	Oil · Bbis				water - Bb s			 Gas-MCF		
777700 77770 During 7777	011 - 5013							ON ME		
GAS WELL										
Actual Prod. Test - MCF/D	Length of Test				Bbis Cooden wise MMCF			Gravity of Condensate		
Stung Method (pilot, back pr.) Tubing Pressure (Snul-in)					Casing Press.	n: (Shul-in)		Choke Size		
VI. OPERATOR CERTIFICA	TE OF	CU/ (D)	1487		. ,				·	····
I hereby certify that the rules and regular	uons of the C	Di Conservi	3UOE	- i-		OLL CON	SERV.	ATION	DIVISIO	NC
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief					C.L CONSERVATION DIVISION JUN 19 1991					
To draw and complete to the deal of my to	inmisons mo	1 OCHEL			Date	Approve	d			
	_		_							
Signature Gary S. Barker	Operations Mar				By ORIGINAL SIGNED BY JERRY SEXTON					
Printed Name	Operations Mgr.				DISTRICT I SUPERVISOR Title					
6/17/91 Date	91	5-683	-317	1	+ K-₩ ,					
		. 0.00	J							

INSTRUCTIONS: This form is to be filed in compliance with Research

- 1) Request for allowable for newly drilled or deepened well must be accomplianted by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be fixed out for anowable on new and recompleted wells.
- 3) Fill out only Sections 1, 11, 111, and VI for changes of operative well madie or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells

JUN 1 0 1991

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