

Submit 5 Copies  
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

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

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator LBO New Mexico, Inc.		Well API No. 30-025-27710
Address 4101 Birch Street Suite 130 Newport Beach, CA 92660		
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> Other (Please explain) New Well <input type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Dry Gas <input type="checkbox"/> Recompletion <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input checked="" type="checkbox"/> Condensate <input type="checkbox"/> Change in Operator <input type="checkbox"/> <i>show gas connection</i>		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Toni	Well No. 2	Pool Name, Including Formation Nadine Drinkard/ABO	Kind of Lease State, Federal or <u>Fee</u>	Lease No.
Location Unit Letter <u>J</u> : <u>2310</u> Feet From The <u>South</u> Line and <u>480</u> Feet From The <u>East</u> Line Section <u>22</u> Township <u>19S</u> Range <u>38E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Koch for Amoco	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1558 Breckenridge, TX 76024					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1589 Tulsa, OK 74102					
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 22	Twp. 19S	Rge. 38E	Is gas actually connected? Yes	When? 11-20-89

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well	Workover	Deepen X	Plug Back	Same Res'v	Diff Res'v
Date Spudded 08-10-89	Date Compl. Ready to Prod. 09-04-89		Total Depth 7700'		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) 3614 RKB	Name of Producing Formation ABO		Top Oil/Gas Pay 7140		Tubing Depth 7650			
Perforations Open Hole 7140 - 7700					Depth Casing Shoe 7140			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
20"	20"		30'		To Surface			
12-1/4"	8-3/8"		1638		900 SX C.A.L.			
7-7/8"	5-1/2"		7140		800 SX C.A.L.			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank 09-04-89	Date of Test 09-18-89	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 Hours	Tubing Pressure 220 #	Casing Pressure 0	Choke Size 3/4"
Actual Prod. During Test 90 BBLS	Oil - Bbls. 90 BBLS	Water - Bbls. 40 BBLS	Gas-MCF 780

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature  
Raymond A. Diaz President  
Printed Name  
11-21-89 (714) 261-8181  
Date Telephone No.

OIL CONSERVATION DIVISION

NOV 27 1989

Date Approved

By ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

Title

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.