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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

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 Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Bruce A. Wilbanks Company		Well API No. 30-025-28596
Address 505 N. Big Spring St. STE 500, Midland, Texas 79701 Box 763 Midland, TX 79702		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: <input checked="" type="checkbox"/> Other (Please explain) CASINGHEAD GAS MUST NOT BE Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> PRODUCED AFTER 7-18-90 Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> UNLESS AN EXCEPTION TO R-4970 IS OBTAINED.		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Moore "34" Com.	Well No. 1	Pool Name (Including Formation) Undesignated	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter <u>G</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u> Line Section <u>34</u> Township <u>24-S</u> Range <u>34-E</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"/> Enron Oil Trading & Transportation	Address (Give address to which approved copy of this form is to be sent) Box 1188, Houston, TX 77251-9931					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Transwestern Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1188, Houston, TX 77251-1188					
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 34	Twp. 24S	Rge. 34E	Is gas actually connected? No	When? 5/31/90

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 <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	<input checked="" type="checkbox"/> Deepen <input type="checkbox"/> Reentry	Plug Back	Same Res'v	Diff Res'v
Date Spudded 3-30-90	Date Compl. Ready to Prod. 4-30-90		Total Depth 13,800		P.B.T.D. 13,800			
Elevations (DF, RKB, RT, GR, etc.) 3396 GL	Name of Producing Formation Strawn Lime		Top Oil/Gas Pay 13,647-13,780		Tubing Depth 13,640			
Perforations 13,647-13,780	48 holes				Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
14"	11-3/4"	615	415
11"	8-5/8"	5233'	1250
7-7/8"	5-1/2"	13540	1210
4-3/4"	3-1/2"	15370	250

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.)

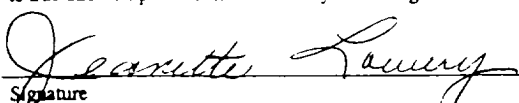
Date First New Oil Run To Tank 4-30-90	Date of Test 4-6-90	Producing Method (Flow, pump, gas lift, etc.) flowing	
Length of Test 24 hours	Tubing Pressure 325	Casing Pressure 0	Choke Size 12/64
Actual Prod. During Test	Oil - Bbls. 4	Water - Bbls. 31	Gas - MCF 234

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
Jeanette Lowery Agent
Printed Name
5/14/90 915 682 7582
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved **MAY 18 1990**

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.