

AMENDED AS TO NAME

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

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

Operator Mewbourne Oil Company		Well API No. 30-025- 29674
Address P. O. Box 7698, Tyler, Texas 75711		
Reason(s) for Filing (Check proper box)		
New Well ☐	Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐	Other (Please explain) Change Well Name.
Recompletion ☐		Effective Date: November 1, 1993
Change in Operator ☐		Old Name: Federal "L" #1
If change of operator give name and address of previous operator		QPBSSU 13 #1

II. DESCRIPTION OF WELL AND LEASE

Lease Name QPBSSU 3	Well No. 1	Pool Name, including Formation Querecho Plains - Upper Bone Spring	Kind of Lease ☒ Federal ☐	Lease No NM-05542 44
Location Unit Letter O : 660 Feet From The South Line and 1980 Feet From The East Line Section 23 Township 18-South Range 32-East , NMMP, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate ☐ Phillips Petroleum - Trucks	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, Texas 79762
Name of Authorized Transporter of Casinghead Gas or Dry Gas ☐ GPM Gas Corporation	Address (Give address to which approved copy of this form is to be sent) Bartlesville, Oklahoma 74004
If well produces oil or liquids, give location of tanks. Unit O Sec. 23 Twp. 18S Rge. 32E	Is gas actually connected? Yes When ?
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 ☐ Gas Well	☐ New Well ☐ Workover ☐ Deepen ☐ Plug Back ☐ Same Res'v ☐ Diff Res'v
Date Spudded	Date Compl. Ready to Prod.	Total Depth
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay
Perforations		P.B.T.D. Tubing Depth Depth Casing Shoe
TUBING, CASING AND CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET
		SACKS CEMENT

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of liquid 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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure	Casing Pressure
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.
		Choke Size Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Flowing 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.

Waylon Thompson
Signature
Waylon Thompson, Engr. Oprns. Secretary
Printed Name
October 27, 1993 (903) 561-2900
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved

By

Title

Orig. Signed by
Paul Gartz
Geologist

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) 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 well to be tested.