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NEW MEXICO OIL CONSERVATION COM. SION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-85

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JUL 2 1982

Operator	Delta Drilling Company ✓	O. C. D. ARTESIA, OFFICE
Address	3100-C North "A" ST. Midland, Texas 79701	
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well	<input type="checkbox"/>	Effective June 1, 1982
Recompletion	<input type="checkbox"/>	
Change in Ownership	<input checked="" type="checkbox"/>	
Change in Transporter of:		
Oil	<input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Casinghead Gas	<input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner T.E.C. 3027 Briarwood San Angelo, Texas 76901 c/o Jack Tubb

I. DESCRIPTION OF WELL AND LEASE	
Lease Name	Continental B. State
Well No.	3
Pool Name, including Formation	Artesia Premier
Kind of Lease	State, Federal or Fee State
Lease No.	N 4201
Location	
Unit Letter	N
	990
Feet From The	South
Line and	1375
Feet From The	West
Line of Section	30
Township	17S
Range	29E
NMPM,	Eddy
County	

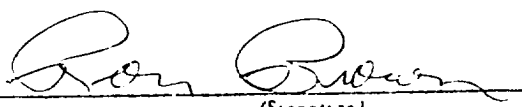
II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS	
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Injection Well	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Pge. Is gas actually connected? When


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

V. 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 P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation Top Oil/Gas Pay Tubing Depth
Perforations	Depth Casing Shoe
TUBING, CASING, AND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE DEPTH SET SACKS CEMENT

VI. 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 allowable for this depth or be for full 24 hours)	
Date First New Oil Run To Tanks	Date of Test Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Tubing Pressure Casing Pressure Choke Size
Actual Prod. During Test	Oil-Bbls. Water-Bbls. Gas-MCF

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

VII. CERTIFICATE OF COMPLIANCE	
I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.	
	
Production Engineer	
6-29-82	

OIL CONSERVATION COMMISSION	
JUL 2 1982	
APPROVED	BY 
TITLE SUPERVISOR, DISTRICT II	
This form is to be filed in compliance with RULE 1104.	
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.	
All sections of this form must be filled out completely for allowable on new and recompleted wells.	
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.	
Separate Forms C-104 must be filed for each pool in multiply completed wells.	