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

State of New Mexico Energy, Minerals and Natural Resources Department

Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

**SEP - 1** 1992

DISTRICT II P.O. Drawer DD, Attesia, NM 88210	P.O. Box 2088 Santa Fe, New Mexico 87504-2088						C. C. D.			
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410						~	يَ إِنَّ أَنَّ أَصَالَ مِنْ الْمُعَلِّمِينَ	ř		
_	REQUEST	FOR AL	LOWAE	AND NA.	TURAL GA	ZATION AS				
I. Operator	1017	-7110 1171	1011/12 0/	Well API No.						
Mack Energy Corporation√						30-	015-10756			
Address		210	-							
P.O. Box 276, Arte	sia, NM 882	210		Othe	et (Please expla	zin)				
Reason(s) for Filing (Check proper box) New Well	Change	in Transpo	iter of:							
Recompletion	~_	Dry Ga	r1	Eff	ective 8,	/1/92				
Change in Operator	Casinghead Gas [									
If change of operator give name and address of previous operator Mark	oob Energy C	orpora	tion,	P. O. Dr	awer 217	, Artesi	a, NM 88	1210		
II. DESCRIPTION OF WELL	AND LEASE							-,	;;	
Lease Name G-J West Coop Unit	Well No. Pool Name, Including Formation						Kind of Lease Lease No. Statex Residual SOCKER B-514			
Location	66Ô			aarth II.	1986	) r.	et From The	east	Line	
Unit Letter B	: 660	Feet Fit	om TheI	TOLLTI TIM	and	<u></u> 10				
Section 28 Townshi	ip 17S	Range	29E	, 1/1	MFM,		Eddy		County	
THE THEORY AND	ICDOPTED OF	OU ANI	D NATH	RAL GAS						
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	Address (Give address to which approved copy of this form a to be sem)									
Navajo Refining Co	P.O. Box 159, Artesia, NM 88210  Address (Give address to which approved copy of this form is to be sent)									
Name of Authorized Transporter of Casin	Address (Give address to which appro									
GPM Corporation If well produces oil or liquids,	Unit Sec.	Twp.	Rge.	ls gas actuall		When				
give location of tanks.	) out   see		1		,	<u>i</u>				
If this production is commingled with that	from any other lease	or pool, giv	e comming!	ing order numl	ber:					
IV. COMPLETION DATA	Oil W	•II (	Jas Well	New Well	Workover	Deepen	Plug Back   Sz	ine Res'v	Diff Res'v	
Designate Type of Completion			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		İ	<u>i                                     </u>	ļ		Ĺ	
Date Spudded	Date Compl. Ready	to Prod.		Total Depth			P.B.T.D.			
C. L. C. T. Landles				Top Oil/Gas Pay			Tubing Depth			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation							- 0 1			
Perforations				J			Depth Casing S	lioe		
			18 1105	CIENTENIA I	NG DECOR	<u> </u>				
1017.017	TUBING, CASING AND HOLE SIZE CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT		
HOLE SIZE	HOLE SIZE CASING & TUBING SIZE			DEI III DEI			Posted ID 3			
							9-11-92			
							6/19 67	<b>/</b>		
V. TEST DATA AND REQUE	ST FOR ALLOY	VABLE		L			1			
OIL WELL (Test must be after	recovery of total volum	ne of load o	oil and must	be equal to or	exceed top allo	owable for this	depth or be for	ſull 24 hows	.)	
Date First New Oil Run To Tank	Date of Test			Producing Mo	ethod (Flow, pr	ump, gas lift, e	ic.)			
		Casing Pressure Choke Size								
Length of Test	Tubing Pressure	Tubing Pressure								
Actual Prod. During Test	Oil - Bbls.			Water - Bbis.			Gas- MCF			
GAS WELL							· · · · · · · · · · · · · · · · · · ·			
Actual Prod. Test - MCF/D	Bbls. Condensate/MMCF			Gravity of Condensate						
				Casing Pressure (Shut-in)			Choke Size			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Canal Francisco						
VI. OPERATOR CERTIFIC	ATE OF COM	PLIAN	CE		NI 00N		TION D	MelOi	ΛĪ.	
t harshy cartify that the rules and repul	ations of the Oil Cons	ervation			IL CON	SEHVA	ATION DI	V13101	V	
Division have been complied with and	that the information g	Iven acove		<b>.</b>	<b>A</b>	. SF	p 🕶 🕯 100	2		
is usually complete to the best of any informedge and belief.				Date Approved SEP 1992 ORIGINAL SIGNED BY						
					OF RA	IKE WILL	AMS			
Signature				Ву	SI	JPERVISO	R. DISTRIC	1 1		
Rhonda Nelson	Production	<u>Cleri</u> Tide	<u> </u>	Title						
Printed Name AUG 2 8 1992	·	48-330		11116						
Date	Tr	lephone No	) <b>.</b>	Н						

ing the latter with the specific and the state of the special production with the state of 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.