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U.S.G.S.
LAND OFFICE
TRANSPORTER OIL
GAS
OPERATOR
PRORATION OFFICE

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-11
Effective 1-1-85

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED BY
OCT 16 1985
O. C. D.
ARTESIA, OFFICE

Operator The Superior Oil Company

Address Nine Greenway Plaza, Suite 2700, Houston, Texas 77046

Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Burton Flat Well No. 1 Pool Name, including Formation Avalon-Bone Spring, East Kind of Lease State, Federal or Fee Fee Lease No.
Location Unit Letter J : 2950 Feet From The N Line and 1700 Feet From The E
Line of Section 1 Township 21S Range 27E, NMPM, Eddy County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐
The Permian Corporation Permian (Eff. 9/1/87) Address (Give address to which approved copy of this form is to be sent) Box 1183, Houston, TX 77001
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
Phillips Petroleum Co, Address (Give address to which approved copy of this form is to be sent) Phillips Bldg, Bartlesville, OK 74004
If well produces oil or liquids, give location of tanks. Unit 0 Sec. 1 Twp. 21 Rge. 27 Is gas actually connected? When YES 10-1-85

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

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 7-24-85 Date Compl. Ready to Prod. 9-26-85 Total Depth 5722 P.B.T.D. 5680
Elevations (DF, RKB, RT, GR, etc.) KB - 3204 Name of Producing Formation Bone Spring Top Oil/Gas Pay 5604 Tubing Depth SN @ 5620
Perforations 5604-5622 Depth Casing Shoe --

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2	13 3/8	665	650 Post ID-2
12 1/4	8 5/8	2552	1500 10-18-85
7 7/8	5 1/2	5722	1250 Comp + RK
	2 7/8	SN @ 5620	

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 Tanks 9-26-85 Date of Test 10-1-85 Producing Method (Flow, pump, gas lift, etc.) pumping
Length of Test 24 hrs. Tubing Pressure Casing Pressure Choke Size
Actual Prod. During Test Oil - Bbls. 10 Water - Bbls. 6 Gas - MCF 125
GOR 12500!

GAS WELL

Actual Prod. Test-MCF/D Length of Test Bbls. Condensate/MCF Gravity of Condensate 43.5 @ 60
Testing Method (pilot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size

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.

Nancy Lewis
MOORE PRODUCING TX. & N.M. (Signature)
AS AGENT FOR THE SUPERIOR OIL COMPANY
10-11-85 (Date)

OIL CONSERVATION COMMISSION

APPROVED OCT 17 1985
Original Signed By Les A. Clements
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

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