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

State of New Mexico E. ___, Minerals and Natural Resources Departmen

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

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

DISTRICT III 1000 Rio Brazos Rd., Artec, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

	TOT	TRANSPORT	T OIL	AND NATURA	L GA\$	}					
Portson Oil Company							Well API No.				
		3001526503									
ddress 301 Commerce St.	reet, Suite	3301, Fort	t Wa	rth, TX 761	02						
eason(x) for Filing (Check proper box)						Toct	allauahi	- for	1,000 bar		
ew Well		ge in Transporter o	of:	condensate	o for	rest	atiomapi	e for	1,000 bar		
ecompletion	Oil	Dry Gan									
lange in Operator	Casinghead Gas	_ `		(374 barro							
hange of operator give name				BPII)_Stra	wn rot	cmatio	n_10,616				
l address of previous operator						······································		June 1	/97/		
DESCRIPTION OF WELL	AND LEASE										
ase Name		No. Pool Name,		-			of Lease		Lease No.		
Sylvite Federa	trawn		State Federal or Fee NM-84721								
exation re	1000										
Unit Letter	:1980	Feet From T	ħε	orth_Line and	660.	Fe	et From The	West	Line		
6 -	T-20-5	- D)		F 1 1		•				
Section 6 Towns	hip T-20-S	Range R-3	30-15	, NMPM,	Eddy				County		
. DESIGNATION OF TRA	NSPORTER OF	OIL AND N	ATU	RAL GAS							
me of Authorized Transporter of Oil		-descrip		Address (Give address	s to which	approved	copy of this fe	orm is to be s	seni)		
Pride Pipeline Com	LJ	T X		P.O. Box 2	į.						
me of Authorized Transporter of Casi	_:	or Dry Gas	$\overline{\Box}$	Address (Give addres.					sens)		
n/a	· <u> </u>			n/a	ŀ				abi nor		
well produces oil or liquids,	Unit Sec.	Twp.	Rge.	Is gas actually connect	ted?	When	7	i			
e location of tanks.	E 6		30E	no		_1.' *	n/a				
nis production is commingled with the	t from any other lease	e or pool, give con	nmingl	·					MCLT 'AC		
COMPLETION DATA	-					Titl	7.\. 1	المناثات و			
	Oil V	Well Gas W	/e11	New Well Works	ver	Deepen	Plug Dack	Same Res'v	Dist Res'y		
Designate Type of Completion		l×	<u> </u>	x							
e Spidded	Date Compl. Reac	ty to Prod.		Total Depth	T		P.B.T.D.	_			
12-9-90		/21/91		12.090' Top Oil/Gas Pay		m.,,		9991			
vations (DF, RKB, RT, OR etc.)	Name of Producing Formation			1		Tubing Depth					
262 GR 3285 KB Strawn				10,616'		10,668'					
forations		*			I.	,					
0,719-10,722' 10,784				10,616-10		0,652	12,08	9.			
		PUBING, CASING AND			CEMENTING RECORD						
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT					
26'		20"		387		1175					
17 ½.		13 3/8		1,310		1120					
i 2 ½	8 5/8			3,208			1275				
7 7/8		1/2		12,090			<u> </u>	1250_Sk	ζς		
TEST DATA AND REQUI	ST FOR ALLO	INVABLE	<u>/</u>	be equal to at exceed t	on allaum	ble for this	denth or he f	or full 24 ho	urs)		
		ume of home by and	a miai	Producing Method (FI	aw. numb	. ras list. e	ic.)	J. J			
e First New Oil Run To Tank	Date of Tex			"							
3/26/91 ngth of Test		3/26/91 Tubing Pressure		Caring Pressure		Choke Size					
-	"/			NA		32/64"					
24 hours ual Prod. During Test	200 psi	<u></u>		Water - Bbls.			Gas- MCF	<u> </u>			
		96		າກ		109					
96 barrels				l							
AS WELL				∏bls, Condens≥te/MM	ict.		Gravity of C	ondensie			
tual Prod. Test - MCP/D	Length of Text			DOIR, CONGENERIE/MM	ici.		J 312 VILY 01 C	CHOCH SHE			
	TOUR BUTTON	Charles		Casing Pressure (Shut-	-in)		Choke Size		\		
ting Method (pilot, with pr.)	Tubing Pressure (onweitt		Caning Free action (Shift)	,						
							1				
OPERATOR CERTIFIC					CONIC	FRV	ATION	DIVISIO	ON		
I hereby certify that the rules and reg	ulations of the Oil Co	nservation			, , , , ,	, L, 1 V /	.,,	J, 7, 101			
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					MAY 3 0 1991						
is true and complete to the best of my	/ knowledge and belie	C1.		Date Appr	roved		IIMI C	0 1301			
1/2 201	1046.0							nv ·:	:		
Alcufo LADYED				By ORIGINAL SIGNED BY							
Signature Sheryl L. Jonas Agent				NIKE WILLIAMS SUPERVISOR, DISTRICT IT							
		Title		Title	S	UPERVI	SOR, DIS	IRICI II,			
Printed Name 5/29/91	(915) 68			Title					•		
Date		Telephone No.				هوا الاستان المستهية	- * * * * * * * * * * * * * * * * * * *				
2.00		1		4.0							

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.