Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM \$8240

Energy, Minerals and Natural Resources Department

See Instructions at Bottom of Page

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brizos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Vantage Point Operating Company								Well API No. 31522				
Address 5801 E. 41st, suite 1001, Tulsa, Oklahoma 74135									<u> </u>			
Reason(a) for Filing (Check proper box)	te 1001	, Tuls	a, 0	klahoma	2 74135 Out	es (Please expl	ain)		<u> </u>			
New Well		Change in	•			١٨٠.	Jan 5	لمما	141011			
Recompletion Change in Operator	Oil Caringhea	d Gas 🗌	Dry G			γVવ	LICK O	apply	vve i i			
Katana afamata sim same					O. Box	1610, Mic	iland. T	exas 797				
IL DESCRIPTION OF WELL	vision	of Atl	anti	c Richf	ield Cor	npany		<u> </u>				
Horseshoe Gollup Unit	Well Na 1-W	i	un	ter lunder			Kind of Lease No. State, Federal or Fee 14 22 402 25					
Location Unit Letter	1375					e and 19	1815 10 F	et From TheLine				
Section 19 Township	31-	ΛI		16- N		MPM,	San Jua			County		
						<u> </u>				County		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATUL Name of Authorized Transporter of Oil						RAL GAS Address (Give address to which approved copy of this form is to be sent)						
Name of Authorized Transporter of Casing	Address (Give address to which approved copy of this form is to be sent)											
If well produces oil or liquids, give location of tanks.			c. Twp. Rge.		is gas actuali	y connected?	When	When ?				
If this production is commingled with that IV. COMPLETION DATA	from any oth	er lease or p	pool, giv	ve comming!	ing order numl	ber:						
Designate Type of Completion	- (X)	Oil Well	1	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Date Spudded	Date Comp	l. Ready to	Prod.		Total Depth			P.B.T.D.		J		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas I	ъ		Tubing Depth				
Perforations								Depth Casing	Shoe			
	T	UBING.	CASII	NG AND	CEMENTI	NG RECOR	D	<u> </u>				
HOLE SIZE		CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
		·						 				
V. TEST DATA AND REQUES	T FOR A	LLOWA	BLE					<u> </u>				
OIL WELL (Test must be after re	T		of load o	oil and must					r full 24 hour	3.)		
Date First New Oil Kun 10 (ank	First New Oil Run To Tank Date of Test					Producing Method (Flow, pump, gas lift, etc.)						
Length of Test	Tubing Pressure					re		SE LEVE				
Actual Prod. During Test	uring Test Oil - Bbls.							MAR 0 4 1991				
GAS WELL									CON	DIM		
Actual Prod. Test - MCF/D	Prod. Test - MCF/D Length of Test					Bbis. Condensate/MMCF			Gravity of Contentale			
sting Method (pitot, back pr.) Tubing Pressure (Shut-in)					Casing Pressu	re (Shut-ia)	,	Choke Size				
VL OPERATOR CERTIFICA				ICE		JII CON	SERV	ATION F				
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					OIL CONSERVATION DIVISION FEB 2 6 1991							
is true and complete to the best of my knowledge and belief.					Date Approved							
Ullough L. Diegnen					3.120							
Depart L. Greenich Production Asst.					SUPERVISOR DISTRICT #3							
Printed Name 1-19-91 918-664-2100					Title							
Date		Telep	hone N	o.	i							

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.