

OIL CONSERVATION DIVISION

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

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator P & P Producing, Inc.		Well API No. 30-045-25010
Address P.O. Box 3178, Midland, TX 79702-3178		
Reason(s) for Filing (Check proper box) ☐ Other (Please explain)		
New Well ☐	Change in Transporter of:	
Recompletion ☐	Oil ☐ Dry Gas ☐	
Change in Operator ☒	Casinghead Gas ☐ Condensate ☐	EFF. 11/1/93
If change of operator give name and address of previous operator Graham Royalty, Ltd.		

II. DESCRIPTION OF WELL AND LEASE

Lease Name New Mexico State	Well No. 3	Pool Name, including Formation Nageezi-Gallup	Kind of Lease State, Federal or Fee	Lease No. 1-2986
Location Unit Letter G : 1650 Feet From The North Line and 1650 Feet From The East Line Section 32 Township 24N Range 8W NMPM San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Giant Refining Co.	Address (Give address to which approved copy of this form is to be sent) 23733 N. Scottsdale Rd. Scottsdale, AZ 85255					
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Bannon Energy Corp.	Address (Give address to which approved copy of this form is to be sent) 3934 FM 1960 West #240, Houston, TX 77068					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 32	Twp. 24N	Rge. 8W	Is gas actually connected? YES	When? 8/5/81
If production is commingled with that from any other lease or pool, give commingling order number:						

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res.	Diff. Res.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (D.F., R.K.B., RT., GR., etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Performance						Depth Casing Shoe		

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

V. 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 Test	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/M/MCF	Gravity of Condensate
Testing Method (pump, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Larry R. Boren
Signature
Larry R. Boren Manager/Operations Accounting
Printed Name
9/29/93 **915-686-4062**
Date Telephone No

OIL CONSERVATION DIVISION

Date Approved **NOV 1 2 1993**

By **Bill D. Humph**
Title **SUPERVISOR DISTRICT #3**

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.