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

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Superseding Old C-104 and C-114
Effective 1-1-65

Operator
NRM Petroleum Corporation

Address
600 W. Illinois, Suite 1000 - Midland, TX 79701

Reason(s) for filing (Check proper box)

New Well <input checked="" type="checkbox"/>	Change In Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change In Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

CASINGHEAD GAS MUST NOT BE FLARED AFTER 7/1/83 UNLESS AN EXCEPTION TO R-4070 IS OBTAINED.

If change of ownership give name and address of previous owner _____

DESCRIPTION OF WELL AND LEASE

* 7322 5-1-83

Lease Name Metzger	Well No. 1	Pool Name, including Formation Chaveroo San Andres	Kind of Lease State, Federal or Fee	Lease No. Fee
Location Unit Letter <u>J</u> ; <u>1980</u> Feet From The <u>east</u> Line and <u>1980</u> Feet From The <u>South</u> Line of Section <u>17</u> Township <u>7-S</u> Range <u>34-E</u> , N.M.P.M. <u>Roosevelt</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Western Transportation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183 - Houston, TX 77001
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	J 17 7-S 34-E

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res't. <input type="checkbox"/>	Diff. Res't. <input type="checkbox"/>
Date Spudded 4-2-83	Date Compl. Ready to Prod. 4-28-83	Total Depth 4400'	P.B.T.D. 4300'					
Elevations (DF, RKB, RT, GR, etc.) 4313.7 GR	Name of Producing Formation San Andres	Top Oil/Gas Pay	Tubing Depth 4279'					
Perforations 4252', 53', 54', 55', 56', 57', 58', 59', 60', 61', 62', 63', 64'		Depth Casing Shoe 4400'						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/2	8 5/8" 24#		1560'		950 sx			
7 7/8	4 1/2" 10.5#		4400'		1975 sx			

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 4-28-83	Date of Test 5-5-83	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24	Tubing Pressure 20-30#	Casing Pressure 510#	Choke Size 24/64"
Actual Prod. During Test 110	Oil-Bbls. 110	Water-Bbls. 0	Gas-MCF .25

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
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.

Ollie West
(Signature)
Production Superintendent
(Title)
May 11, 1983
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUN 1 1983, 19
BY ORIGINAL SIGNED BY EDDIE SEAY
TITLE OIL & GAS INSPECTOR

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 deviator 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 re-completed 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.

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MAY 23 1983
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