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

State of New Mexico Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

•	TO	TRANS	PORT	TOIL /	AND NA	TURAL GA	S Well Al	No.			
Operator Citation Oil &	Gas Corp	oratio	n				Well Al	1110.			
Address 16800 Greenspo				e 300) South	n, Houston	, Texas	77060			
Reason(s) for Filing (Check proper box)						her (Please explai	л)				
New Well		ange in Tran		ol:							
Recompletion Change in Operator	Oil Casinghead G	Dry or Cor		Ä	XX	Effective	March	1, 1989			
Change in Operator				400		ingia Cui	+0 1500	Midlan	d TX 7	79701	
f change of operator give name and address of previous operator Mab	<u>ee Petro</u>	<u>leum Co</u>	rp.,	400	W. 111	inois, Sui	1200	, mulan	<u> </u>	<u> </u>	
	AND LEAS	F.									
Lease Name	SCRIPTION OF WELL AND LEASE Well No. Pool Name, Including B					0		Lease FEE	Le	ase No.	
Belcher	İ	1 8-1				n Drinkard	State, t	ederal-or Fee			
Location				00 - Tu							
Unit LetterM	. 660	Fee	et From	The S	outh L	ine and660	Fee	t From The	west	Line	
Unit Letter	_ •								103	C	
Section 7 Townshi	ip 22S	Ra	inge	3	8E ,	NMPM,			Lea	Coi nty	
III. DESIGNATION OF TRAN		OF OIL	AND N	NATUE	Address (C	S Sive address 10 wh	ich approved	copy of this for	m is 10 be se	nt)	
Name of Authorized Transporter of Oil	1 (1)	Condensate	- 1]	D C	. Box 118	8. Houst	on, TX	77251-	1188	
Enron OIl Trading 8	<u>i Iranspo</u>		D- Cas	pany	Address (C	Give address to wh	ich approved	copy of this for	m is to be se	int)	
Name of Authorized Transporter of Casin Warren Petroleum Co	gnead Gas Vnn	XX or	Dry Gas	الــا	P (). Box 158	9. Tulsa	o, OK 74	102		
		ec. Tv	.	Rge.	ls gas actu	ally connected?	When			- '	
If well produces oil or liquids, give location of tanks.		•		38E	Yes			/25/68			
If this production is commingled with that	1 '' 1				L	ımber: R-7	536, Cas	se NO. 81	<u>79, Ma</u>	y 21, 198	
IV. COMPLETION DATA	110111 421) 54101		., 6	Č			1 C -				
IV. COM BETON E		Oil Well	Gas	Well	New We	ell Workover	Deepen	Plug Back S	lame Res'v	Diff Res'v	
Designate Type of Completion		Χ	j		1		<u></u>	<u></u> _			
Date Spudded	Date Compl.	Ready to Pr	rod.		Total Dep			P.B.T.D.	221		
10/22/67	12/3	12/31/84			7	7300'		7231'			
Elevations (DF, RKB, RT, GR, etc.)		Name of Producing Formation n			Top Oil/Gas Pay			Tubing Depth 7136'			
3357 DF	\$1inebry	∕-S/Dri	nkard	l Abo-	Tubb_	5572'		Depth Casing			
Perforations Blinebry: 557	2-5889 (2	9 hole	s).	Tubb:	: 6155	-6272 (11	nores;	Deput Casing	Siloc		
S.Brunson Drinkard	Abo: 680)5-7129	(22	holes	5)			<u> </u>			
	TU	JBING, C	ASING	AND	CEMEN	TING RECOR	<u>m</u>	T	ACVC CEN	AENT	
HOLE SIZE	HOLE SIZE CASING & TUBING SIZE			E	1	DEPTH SET		SACKS CEMENT 505 SX			
12"	2" 9-5/8"					296'		990 sx			
8-3/4"	7"			.6		297'		330	3^		
	2-3/	/8"			/	136'					
	200 500 41	LOWAY	OI E		J			<u></u>			
V. TEST DATA AND REQUE OIL WELL (Test must be after	SI FOR AL	LLUWAI	José ail	and must	he equal to	o or exceed top all	lowable for th	is depth or be fo	or full 24 ho	ws.)	
			1000 04	4/12 //1101	Producing	Method (Flow, p	ump, gas lift,	etc.)			
Date First New Oil Run To Tank	Date of Test										
Leasth of Tod	Tuhing Press	Tubing Pressure				ressure		Choke Size			
Length of Test	Tuonig Treat	3610									
Actual Prod. During Test	Oil - Bbls.	Oil - Bbls.			Water - Bbls.			Gas- MCF			
Actual Flot. During Tool	0 20										
GAS WELL								10			
Actual Prod. Test - MCF/D	Length of T	est			Bbls. Co	ndensate/MMCF		Gravity of Condensate			
								Choka Siza			
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size				
						····					
VI. OPERATOR CERTIFI	CATE OF	COMPI	LIAN	CE			MCED/	/ATION	DIVISI	ON	
I hereby certify that the rules and res	gulations of the (Oil Conserva	ation			OIL CO	NOFU	LIAD	0 100	0	
Division have been complied with and that the information given above				MAR 2 8 1989							
is true and complete to the best of m	ny knowledge an	d belief.			D	ate Approv	ed				
Beath An	N. o	. 0									
Desta Fin	n Hu	سك			∥ B	У	ORIGIN	AL SIGNED	BY JERRY	SEXTON	
Signature	Dwaduat	ion Co	ordin	ator		•	1	DISTRICT I S	UPERVISC	DR	
Ruth Ann Hines - Production Coordinator Printed Name Title				Title							
3/21/89		713/87	4 - 987	7							
Date		Telep	phone No).				na ro šticas i pod i se s			
			التاريب		· • • • • • • • • • • • • • • • • • • •	A 17	<u> </u>	4 10 16 44 7 10 1 1			

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.

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OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

ſ.	TOTRA	NSPORT OIL	AND NAT	UHAL GAS	Well AF	I No.			
Operator Citation Oil &	Cas Corporat	ion					_		
4.11					, L,				
Address 16800 Greenspoi	nt Park Driv	e, Suite 30	O South,	Houston	, Texas	77060			
Reason(s) for Filing (Check proper box)			Othe	r (Please explai	n)				
New Well		Transporter of:							
Kecompledon	Oil Casinghead Gas	Dry Gas	XX Ef	fective	March	1, 1989		ļ	
Change in Operator XX If change of operator give name Mahe	Casingnead Gas	Controlled (100	u tlliv	noic Sui	to 1500	Midland	. TX 7	9701	
and address of previous operator Mabe	e Petroleum	torp., 400	W. 11111	1015, 341	te 1300	, illulaira	<u>, , , , , , , , , , , , , , , , , , , </u>		
II. DESCRIPTION OF WELL A	ND LEASE		771 1 -4	T. CCC	I e	ease No.			
Lease Name	Well No.	Pool Name, Including	ng Formation	Drinkard	Kind of State, F	Lease FEE edemitor Fee			
Belcher	1 1	Abo - Iu	ibb				<u> </u>		
Location M	. 660	Feet From The		660	Fee	t From TheW	rest	Line	
Unit Letter	:	Feet From The	Line	and	1	_			
Section 7 Township	22\$	Range	38E , NI	ирм,			.ea	County	
III. DESIGNATION OF TRANS	SPORTER OF O	IL AND NATU	RAL GAS						
Name of Authorized Transporter of Oil	XX or Conder	nsaie	Address (Giv	e address to whi	ich approved Deus t	copy of this form	17251~1	*/ 1188	
Enron OI1 Trading &	Transportat	ion Company	P. U.	BOX 1100	ich approved	on, TX 7	is to be se	nt)	
Name of Authorized Transporter of Casing Warren Petroleum Con	head Gas XX	or Dry Gas	Address (Un	BOX 1580	<i>пругочен</i> Э. Ти1sa	, OK 741	02		
If well produces oil or liquids,	Unit Sec.	Twp. Rge.		y connected?	When	, 011			
give location of tanks.	1 M 7	22S 38E_	Yes		7/	25/68			
If this production is commingled with that f	rom any other lease or	pool, give comming	ling order num			se NO. 817	<u> 19, May</u>	<u>y 21, 198</u>	
IV. COMPLETION DATA				,D)	<u>y C</u>	Plug Back Sa	me Res'v	Diff Res'v	
Designate Type of Completion -	Oil Wel - (X) X	1 Gas Well	New Well	Workover	Deepen	riug Dack Sa	nic Res .		
	Date Compl. Ready t	o Prod.	Total Depth	<u> </u>	l	P.B.T.D.			
Date Spudded 10/22/67	12/31/84	73	00'		7231'				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing	Top Oil/Gas		-	Tubing Depth				
2257 DE	Blinebry-S/D	rinkard Abo	Tubb	Tubb 5572'			7136 Depth Casing Shoe		
Perforations Blinebry: 5572	-5889 (29 ho	les). Tubb	: 6155-6	2/2 (11	no res)	Deput Casing C	moc		
S.Brunson Drinkard	Abo: 6805-/1	29 (22 note	S).	NG PECOP	D				
			CEMENT	CEMENTING RECORD DEPTH SET			SACKS CEMENT		
HOLE SIZE	CASING & T 9-5/8"	OBING SIZE	1296'			505 sx			
8-3/4"	7"		729	7297'			990 sx		
0-3/4	2-3/8"		71.	7136'					
			<u> </u>						
V. TEST DATA AND REQUES	ST FOR ALLOW	ABLE		ar arcaed top all	owable for th	is depth or be for	· [ш] 24 hoi	urs.)	
OIL WELL (Test must be after r	ecovery of total volum	e of load oil and mu	Producing N	Method (Flow, p	ump, gas lift,	elc.)	<u> </u>		
Date First New Oil Run To Tank	Date of Test								
Length of Test	Tubing Pressure		Casing Pres	sure		Choke Size Gas- MCF			
Length of Tex									
Actual Prod. During Test	Oil - Bbls.		Water - Bb	8.					
GAS WELL						Gravity of Co	ndensale		
Actual Prod. Test - MCF/D	Length of Test		Bbls. Cond	ensate/MMCF		Giavity of Co	11 OCH SALE		
	Tubing Pressure (St		Casino Pre	ssure (Shut-in)		Choke Size			
Testing Method (pitot, back pr.)	Tuoing Plessure (3)	ia-m)		·					
AT ODED ATOD CEDITER	TATE OF COM	IPLIANCE		011 00	VICEU/	'ATION E	71/1/21	ON	
VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation				OIL CO	NOEUA				
Division have been complied with and that the information given above						MAR 2	8 198	9	
is true and complete to the best of my			Da	te Approv	ed				
R. H. An			ORIGIN	IAL SIGNED I	Y JERRY	SEXTON			
Beth Ann Hines						DISTRICT I SI			
Signature Ruth Ann Hines - Production Coordinator Title				,					
Printed Name	Tit	le	<u></u>						
3/21/89 Date	///	874-9877 Celephone No.						المناوعة ا	
				Action Control					

- 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.
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REQUEST FOR ALLOWABLE AND AUTHORIZATION

Į .	TOTRA	NSPORT OIL	AND NATURAL GA	NS Well A	DI No				
Operator Citation Oil &	Gas Corporat	ion		Well A	P1 No.				
Address 16800 Greenspo	int Park Driv	/e, Suite 30	O South, Houstor	ı, Texas	77060				
Reason(s) for Filing (Check proper box)	 -		Other (Please expla	in)					
New Well		Transporter of:							
Recompletion	Oil U	Dry Gas	XX Effective	March	1, 1989)			
Change in Operator	Casinghead Gas			1500	M: J1 a.	TV "	70701		
20 22 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Corp., 400	W. Illinois, Su	1te 1500), Midiai	nα, Ιλ /	79701		
II. DESCRIPTION OF WELL.				75: 1	<u> </u>		ase No.		
Lease Name Belcher	Well No.	Pool Name, Including Blinebry-	Brunson Drinker		Kind of Lease FEE Lease No. State, Federal-or Fee				
Location		Abe Te							
Unit LetterM	:660	Feet From The	outh Line and 660	Fee	et From The _	west	Line		
Section 7 Township	225	Range 3	38E , ммрм ,			Lea	County		
III. DESIGNATION OF TRAN	SPORTER OF O	IL AND NATU	RAL GAS						
Name of Authorized Transporter of Oil	XX or Conde		Address (Give address to wh	nich approved	copy of this fo	rm is to be se	nt)		
Enron OIl Trading &	Transportat	ion Company	P. O. Box 118						
Name of Authorized Transporter of Casing		or Dry Gas	Address (Give address to wh				nt)		
Warren Petroleum Co			P. O. Box 158	<u>9, Tulsa</u>	a, OK 7	4102			
If well produces oil or liquids,	Unit Sec.	Twp. Rge.	i a c	When					
give location of tanks.	M 7	22S 38E	Yes		<u>/25/68</u>	170 Ma	. 21 100		
If this production is commingled with that	from any other lease or	pool, give commingl			<u>se NU. 8</u>	1/9, Ma	y 21, 1984		
IV. COMPLETION DATA				HC_		C Durle	Dist Beele		
Designate Type of Completion	Oil Well χ	I Gas Well	New Well Workover	Deepen	Plug Back	Same Res v	Diff Res'v		
Date Spudded	Date Compl. Ready t	o Prod.	Total Depth		P.B.T.D.				
10/22/67	12/31/84	7300'	7231 '						
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing	คนาร์งอก	Top Oil/Gas Pay	Tubing Depth					
3357 DF	Blinebry-S/D	rinkard Abo-	Tubb 5572'	7136'					
Perforations Blinebry: 5572	-5889 (29 ho	les). Tubb	: 6155-6272 (11	holes)	Depth Casin	g Shoe			
S.Brunson Drinkard	<u> Abo: 6805-71</u>	29 (22 hole:	s).						
	TUBING	, CASING AND	CEMENTING RECOR			1010 0514	FNT		
HOLE SIZE	HOLE SIZE CASING & TUBING SIZE					SACKS CEM	ENI		
12"	9-5/8"		1296'	505 sx 990 sx					
8-3/4" 7"			7297'		990 5X				
	2-3/8"		7136						
THE OTHER PROPERTY.	ET EOD ALLOW	ARIE							
V. TEST DATA AND REQUES	SI FUR ALLUW	ADLE	be equal to or exceed top all	lowable for thi	s depth or be	for full 24 hou	urs.)		
OIL WELL (Test must be after to Date First New Oil Run To Tank		e oj toda oli ana musi	Producing Method (Flow, p	ump, gas lift,	etc.)				
Date First New Oil Ruff 10 120k	Date of Test		7,	7.0	•				
Length of Test	Tubing Pressure		Casing Pressure		Choke Size				
Lengui of rest	Tubing Pressure								
Actual Prod. During Test	Oil - Bbls.		Water - Bbls.		Gas- MCF				
,									
GAS WELL									
Actual Prod. Test - MCF/D	Length of Test		Bbis. Condensate/MMCF		Gravity of C	Condensate			
Actual Float Foot Micros									
Testing Method (pitot, back pr.)	Tubing Pressure (Sh	ut-in)	Casing Pressure (Shut-in)		Choke Size				
VI. OPERATOR CERTIFIC	CATE OF COM	PLIANCE	OIL COI	NOEDY	ATION	חואופות	⊃NI		
I hereby certify that the rules and regu				NOEHV					
Division have been complied with and			MAR 2	8 1989	3				
is true and complete to the best of my	knowledge and belief.		Date Approve	ed		- 1000			
Beth An	N. c.		11		CIOLIES				
Desta Association	n Henes	<u> </u>	Ву	JANIDINAL	SIGNED BY	JERRY SI	EXTON		
Signature	Dundunti 0	`aandinatas	-,		- KICT 1 50	PERVISOR			
Ruth Ann Hines -	rroduction (Oordinator Title	Title				,		
3/21/89	713/8	374-9877	1106						
Date Date	Te	elephone No.							

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