

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

I.

Operator Exxon Corporation	Well API No. 30-025-25513
Address P.O. Box 1600, Midland, TX 79702	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator <u>Cancel early ab</u>	

II. DESCRIPTION OF WELL AND LEASE

Lease Name New Mexico S State	Well No. 39	Pool Name, Including Formation Blinebry Oil & Gas	Kind of Lease State, Federal or Fee	Lease No. B 934
Location				
Unit Letter D	: 330	Feet From The North	Line and 550	Feet From The West
Section 2	Township 22S	Range 37E	NMPM,	Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline	Address (Give address to which approved copy of this form is to be sent) P.O. Box 52332, Houston, TX 77052	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Texaco <u>Gas Producing Inc</u>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 728, Hobbs, NM 88240	
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 2
	Twp. 22S	Rge. 37E
	Is gas actually connected? Yes	When? 7-14-77
If this production is commingled with that from any other lease or pool, give commingling order number: <u>PC 137</u>		

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well XX	Gas Well	New Well	Workover	Deepen	Plug Back XX	Same Res'v	Diff. Res'v XX
Date Spudded 3-12-90	Date Compl. Ready to Prod. 3-23-90		Total Depth 7800		P.B.T.D. 6490			
Elevations (DF, RKB, RT, GR, etc.) 3393 KB	Name of Producing Formation Blinebry		Top Oil/Gas Pay 5682		Tubing Depth 5610			
Performances 5682 - 5748, 5782 - 5813					Depth Casing Shoe 7500			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
	9 5/8		1174		700 SXS			
	7		7500		1040 SXS			

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 Tank 3-23-90	Date of Test 4-11-90	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24	Tubing Pressure 190	Casing Pressure 0	Choke Size 18/64
Actual Prod. During Test	Oil - Bbls. 75	Water - Bbls. 0	Gas - MCF 395

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

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.

S. Johnson  
Signature  
Stephen Johnson Administrative Specialist  
Printed Name  
4-27-90 (915) 688-7548 Title  
Date Telephone No.

OIL CONSERVATION DIVISION

APR 30 1990

Date Approved  
By ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR  
Title

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.