Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240 DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

State of New Mexico En. 69, Minerals and Natural Resources Department 25 CEIVED

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

JUL 31 '90

DISTRICT III 1000 Rio Brazos Rd., Azlec, NM 87410					MICO 6730			_			
	REQ					UTHORIZ					
		TOTHA	NSP	OHI OIL	AND NA	TURAL GA	Well A				
Operator	_						3/		1005	Q1	
FROSIMAN OIL CORFORATION V Address							100	<u> </u>		31	
P. O. Drawer W, Artesia, N	4 88210)			Orbo	r (Please expla	:				
Reason(s) for Filing (Check proper box.)		Change in	Transc	vorter of:		a (r ieuse expio	ur)	•			
Recompletion	Oil		Dry G								
Change in Operator	Casinghe	_	Conde								
f change of operator give name		<u></u>									
L DESCRIPTION OF WELL	AND LE	ASE						<u>-</u>			
Lease Name	E TO DE	Well No.	Pool 1	Name, Includi	ng Formation		Kind o	(Lease	L	ase No.	
Union Happy		1	Bu	llseye Sar	n Andres		State,	Federal or Fee	<u> </u>		
Location						20	••				
Unit Letter O	:	660	. Feet I	From The	South Line	and19	<u>80</u> Fe	et From The	East	Line	
Section 1 Township			Range			мрм,	Cha	ves		County	
EOTT Energy Operation AR	SPORTI	ER OF O	ĭL A!	ND NATU	RAL GAS						
Name of Authorized Transporter of Oil	[XX]	or Conde			Address (Giw	e address to wh	ich approved	copy of this forn	n is to be se	nt)	
Enron Oil Trading & Transp	ortatio		<u> </u>		7			77151-118			
Name of Authorized Transporter of Casing				y Gas 🗀	Address (Giw	e address to wh	ich approved	copy of this form	n is so be se	nt)	
Nane					<u> </u>						
If well produces oil or liquids, ive location of tanks.	Unit	Sec.	Twp.	Rge.	ls gas actually	y connected?	When	?			
·	10	 	<u> 18</u> 5	<u> 1 28E</u>	No		i				
this production is commingled with that it. V. COMPLETION DATA	rom any o	ther icase of	poot, g	nve commingi	ing order num	oer:		· · · · · · · · · · · · · · · · · · ·			
V. COMPLETION DATA		Oil Wel	,	Gas Well	New Well	Workover	Deepen	Plug Back S	ame Res'v	Diff Res'v	
Designate Type of Completion	- (X)		i	Cas			2 	,			
Date Spudded	Date Cor	Compl. Ready to Prod.			Total Depth	1	<u> </u>	P.B.T.D.	······································	<u> </u>	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas	Top Oil/Gas Pay			Tubing Depth		
payrandum (pre , reser, ree, text, not.)											
Perforations								Depth Casing	Shoe		
					CTC) CT) ITT	NO PECOP		<u> </u>			
1015075	TUBING, CASING AND				CEMENTI	DEPTH SET		SACKS CEMENT			
HOLE SIZE	CASING & TUBING SIZE			3 SIZE	DEFIN SET			Part ID-3			
								8-3-50			
								che LT: PER			
	-				 			- CMC	2 m 1 .	151	
V. TEST DATA AND REQUES	T FOR	ALLOW	ABL	E	<u> </u>				· · · · · · · · · · · · · · · · · · ·		
OIL WELL (Test must be after t	ecovery of	total volum	e of loa	d oil and mus	i be equal to or	exceed top all	owable for th	is depth or be for	full 24 ho	ers.)	
Date First New Oil Run To Tank	Date of					lethod (Flow, pi					
Length of Test	Tubing Pressure			Casing Pressure			Choke Size	Choke Size			
20161. 01 1711	thought toward										
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gas- MCF			
GAS WELL		 						1			
Actual Prod. Test - MCF/D	Length (of Test			Bbls. Conde	nsate/MMCF		Gravity of Co	adensate		
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
VI. OPERATOR CERTIFIC	ATF	OF COM	PI I	ANCE	1					~	
I hereby certify that the rules and regu						OIL COI	NSERV	'ATION [)IVISI	NC	
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.						_		JUL 3	1 190	3	
is true and complete to the oest of my	THOMICOR	mans Delief.			Dat	e Approve	ed	,845 0		-	
Vali dereit	<u>-i</u>				D.,	()RICINAL	SIGNED	IY		
Signature	Page 2				∥ By_		MIKE WIL	. SIGNED B LIAMS	· · · · · · · · · · · · · · · · · · ·		
Jackie Forister Printed Name	Proof	ction Cl	erk Till				UPERVIS	OR, DISTR	ICT N		
7/31/90	(505)	746_334	и		Title						
Date		To	elephon	e No.	11						

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.