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| | GAS |
| OPERATOR | |
| PRODUCTION OFFICE | |

NEW MEXICO CONSERVATION COMMISSION

REQUEST FOR ALLOWABLE

AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104

Supersedes Old C-104 and C-110

Effective 1-1-65

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FEB 20 1985

O. C. D.

ARTESIA, OFFICE

Operator
Read & Stevens, Inc.

Address

P.O. Box 1518, Roswell, NM 88201

Reason(s) for filing (Check proper box)

New Well

☒

Recompletion

☐

Change in Ownership

☐

Change in Transporter Of:

Oil

☐

Dry Gas

☐

Casinghead Gas

☐

Condensate

☐

Other (Please explain)

If change of ownership give name
and address of previous owner

I. DESCRIPTION OF WELL AND LEASE

| | | | | |
|------------------------|----------|----------------------------------|----------------|--------------------------|
| Lease Name | Well No. | Pool Name, Including Formation | Kind of Lease | Lease No. |
| North Haystack Federal | 1 | Wildcat <i>On Rancho Montoya</i> | Federal | NM-18821 |
| Location | | | | |
| Unit Letter | F | 1980 Feet From The | North Line and | 2030 Feet From The |
| Line Of Section | 26 | Township | 5S Range | 26E, NMPM, Chaves County |

II. DESCRIPTION OF TRANSPORTER OF OIL AND NATURAL GAS

SCURLOCK PERMIAN CORP EFF 9-1-91

| | | | | | | |
|---|--|--|------|------|----------------------------|--------|
| Name of Authorized Transporter of Oil | or Condensate | Address (Give address to which approved copy of this form is to be sent) | | | | |
| Permian Corporation | <input checked="" type="checkbox"/> <i>Permian (EFF. 9/1/78)</i> | P.O. Box 1183, Houston, TX 77002 | | | | |
| Name of Authorized Transporter of Casinghead Gas | <input checked="" type="checkbox"/> Dry Gas | Address (Give address to which approved copy of this form is to be sent) | | | | |
| Transwestern Pipeline Corporation | <input checked="" type="checkbox"/> | P.O. Box 2521, Houston, TX 77252 | | | | |
| If well produces oil or liquids, | Unit | Sec. | Twp. | Rge. | Is gas actually connected? | When |
| give location of tanks | F | 26 | 5S | 26E | YES | 1/8/85 |
| If this production is commingled with that from any other lease or pool, give commingling order number: | | | | | | |

III. COMPLETION DATA

| | | | | | | | | |
|-----------------------------------|---------------------------|-----------------|--------------|-------------------|--------|-----------|------------|-------------|
| Designate Type of Completion-(X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v | Diff. Res'v |
| | | X | X | | | | | |
| Date Spudded | Date Compl. Ready to Prod | Total Depth | P.B.T.D. | | | | | |
| 9/15/80 | 1-2-81 | 6660' | 6586' | | | | | |
| Elevations (DF, RKB, RT, GR, etc) | Name of Prod. Formation | Top Oil/Gas Pay | Tubing Depth | | | | | |
| 3942.7' GR | Montoya | 6450' | 6371' 6361' | | | | | |
| Perforations | 6450' - 6462' | | | Depth Casing Shoe | | 6660' | | |

TUBING, CASING, AND CEMENTING RECORD

| | | | |
|-----------|----------------------|-----------|--------------|
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| 17 1/2" | 13 3/8" | 30' | 400sx |
| 11" | 8 5/8" | 1450' | 575sx |
| 7 7/8" | 4 1/2" | 6660' | 1040sx |
| - | 2 3/8" | 6361' | - |

IV. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load and must be equal to or exceed top allowable for this depth or be for full 24 hours)

| | | | |
|---------------------------|-----------------|---|------------|
| Date First New Oil Run To | Date of Test | Producing Method (Flow, pump, gas lift, etc.) | |
| Tanks: | | | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| Actual Prod. During Test | Oil-Bbls. | Water-Bbls. | Gas-MCF |

AS WELL

| | | | |
|--------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| 1506 | 24 hours | 0 | 0 |
| Testing Method (plot, back pr) | Tubing Pressure (Shut-In) | Casing Pressure (Shut-In) | Choke Size |
| 4-Point | 1535psi | 0 | - |

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.

(Signature)

Drilling & Production Manager
(Title)February 18, 1985
(Date)

OIL CONSERVATION COMMISSION

APPROVED

FEB 25 1985

BY

TITILE

This form is to be filed in compliance with Rule 1104. If this is a request for allowable for a newly drilled well, this form must be accompanied by a tabulation of the deviation 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 recompleted wells. Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such

changes after completion 104 must be filed for each pool in

multiple.

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SECRET