

District I
PO Box 1908, Hobbs, NM 88241-1908
District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brava Rd., Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

Form C-104
Revised February 10, 1994
Instructions on back
Submit to Appropriate District Office
5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Operator name and Address PUEBLO PETROLEUM INC. POST OFFICE BOX 8249 ROSWELL, NEW MEXICO 88202		OGRID Number 018198
API Number 30 - 005-62291	Pool Name RACE TRACK SAN ANDRES	Reason for Filing Code CO - EFFECTIVE 06/01/95
Property Code 009427	Property Name CX PLAINS	Pool Code 50670
		Well Number 15

II. ¹⁰ Surface Location

UL or lot no. 0	Section 19	Township 10S	Range 28E	Lot Ida	Feet from the 990	North/South Line South	Feet from the 1650	East/West Line EAST	County CHAVES
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" Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South Line	Feet from the	East/West Line	County
" Loc Code P	" Producing Method Code	" Gas Connection Date	" C-129 Permit Number	" C-129 Effective Date	" C-129 Expiration Date				

III. Oil and Gas Transporters

" Transporter OGRID 012426	" Transporter Name and Address KELLY MACLASKEY OILFIELD SERVICES INC. POST OFFICE BOX 580 HOBBS, NM 88241	" POD 2186010	" OVG 0	" POD ULSTR Location and Description
				RECEIVED MAY 31 1995 OIL CON. DIV. DIST. 2

IV. Produced Water

" POD	" POD ULSTR Location and Description
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V. Well Completion Data

" Spud Date	" Ready Date	" TD	" PBTD	" Perforations
" Hole Size	" Casing & Tubing Size	" Depth Set	" Seals Cement	

VI. Well Test Data

" Date New Oil	" Gas Delivery Date	" Test Date	" Test Length	" Tbg. Pressure	" Csg. Pressure
" Choke Size	" Oil	" Gas	" AOF	" Test Meter	

" I hereby certify that the rules 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.

Signature:

Printed name:

MARK HAMILTON

Title:

PRESIDENT

Date:

05/29/95

Phone:

505-623-6133

OIL CONSERVATION DIVISION

Approved by:

SUPERVISOR DISTRICT II

Title:

Approval Date:

JUN 2 1995

" If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature

Printed Name

Title

Date

ISTRICT I
O. Box 1980, Hobbs, NM 88240
ISTRICT II
O. Drawer DD, Artesia, NM 88210
ISTRICT III
100 Rio Brazos Rd., Aztec, NM 87410

Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Revised 1/79
See Instructions
at Bottom of Page

RECEIVED

AUG 31 1992

RECEIVED

SEP 18 1992

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

O. C. D.

O. C. D.

Operator Pueblo Petroleum, Inc.	Well API No.
Address P. O. Box 8249 Roswell, NM 88202	
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: Recompletion <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
Change of operator give name and address of previous operator	

DESCRIPTION OF WELL AND LEASE

Well Name CX Plains	Well No. 15	Pool Name, including Formation Racetrack San Andres	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter D : 990 Feet From The South Line and 1650 Feet From The EAST Line Section 19 Township 10S Range 28E , NMPM , Chaves County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Petro Source Partners LTD	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1356 Dumas, TX 79029
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)
Well produces oil or liquids, location of tanks. Unit D Sec. 19 Twp. 10S Rge. 28E	Is gas actually connected? When ?

If production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Is Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.					
Productions (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth					
Productions	Depth Casing Shoe							

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE

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

EXISTING WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Producing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

Signature Gary L. Royal
Printed Name **Gary L. Royal** Title **Comptroller**
Date **8-28-92** Telephone No. **623-6133**

OIL CONSERVATION DIVISION

Date Approved **SEP 21 1992**

By **ORIGINAL SIGNED BY**

MIKE WILLIAMS

Title **SUPERVISOR, DISTRICT II**

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.