STATE OF NEW MEXICO Form C-104 Revised 10-1-78 RIGY AND MINERALS DEPARTMENT ** ** ****** OIL CONSERVATION DIVISION DISTRIBUTION P. O. DOX 2088 RECEIVED SANTA FE SANTA FE, NEW MEXICO 87501 V 8.U.S. SEP 09 '87 LAND DEFICE REQUEST FOR ALLOWABLE OIL IMANIFOMIEM AND DAL O. C. D. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS PROBATION SPEICE ARTESIA OFFICE Operator McKay Oil Corporation Post Office Box 2014, Roswell, New Mexico coson(s) for liling (Check proper box) Other (Please explain) Haw Well Oil Dry Gas Condensate Castaghead Gas Songe in Ownership Change of ownership give name nd address of previous owner. ESCRIPTION OF WELL AND LEASE well No. Fool Name, Including Formation Leges 36190 4 W. Pecos Slope Abo State, Federal or Fee NM Eppers Federal 805 Location 675 West 1650 South Line and Feet From The Feet From The Unit Letter 21E Chaves 5S Range , NMPM, Cou 35 T waship ESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Lane of Authorized Timesporter of Cil Rene of Authorized Transporter of Casinghead Gas or Dry Gas X Address (Give address to which approved copy of this form is to be sent) Post Office Box 2014, Roswell, NM 88201 New Mexico Gas Marketing, Inc. Twp. Unit Rge. is gas actually connected? Sec if well produces oil or liquids, ASAP G 36 6S · 22E No If this production is commingled with that from any other lease or pool, give commingling order numbers COMPLETION DATA Same Res'v. Dill. R. Gas Well Plug Back Oil Well Designate Type of Completion - (X) Χ P.B.T.D. Date Compl. Heady to Prod. Total Depth 3400' 3333' 7-22-87 2-14-87 Top Oil/Gas Pay Tubing Depth levations (DF, RKB, RT, GR, etc.) Name of Producing Formation 2777**'** 2801 Abo 4306' GR Depth Casing Shoe erforations 2801 - 3167.5 TUBING, CASING, AND CEMENTING RECORD CASING & TUBING SIZE 8 5/8" DEPTH SET SACKS CEMENT HOLE SIZE 9291 515 12½ sxs. 7 7/8" 41211 3396 325 sxs. 2 3/8" 2777 (Test must be after recovery of total volume of load oil and must be equal to or exceed top a able for this depth or be for full 24 hours) EST DATA AND REQUEST FOR ALLOWABLE IL WELL Producing Method (Flow, pump, gas lift, etc.) Date of Test Cate First New Ol! Hun To Tanks Choke Size Casing Pressure Tubing Pressure Length of Test Water - Bble. Gas - MCF Actual Prod. During Test CII-Bble. GAS WELL Actual Prod. Tool-MCF/D Gravity of Condensate Length of Test Bbls. Condensate/MMCF 4 hrs. 514 Testing Method (pitot, buck pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-15) Choke Size 6/64 - 12/64750 746 back pr. **DIL CONSERVATION DIVISION** ERTIFICATE OF COMPLIANCE APPROVED_ nereby certify that the rules and regulations of the Oil Conservation Evision have been compiled with and that the information given bove is true and complete to the best of my knowledge and belief. BY. TITLE.

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Production Analyst

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well, this form must be accompanied by a tabulation of the deviatesta taken on the well in accordance with MULE 111. All sections of this form must be filled out completely for al able on new and recompleted wells. Fill out only Sections I, II, III, and VI for changes of ownell name or number, or transporter, or other such Change of condi-

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If this is a request for allowable for a newly drilled or deep

BTATE OF NEW MEXICO Form C-104 Revised 10-1-78 FIGY AND MINERALS DEPARTMENT ** ** ****** OIL CONSERVATION DIVISION 011111111111111 P. O. DOX 2088 RECEIVED IANTA FE SANTA FE, NEW MEXICO 87501 v 8.u.9, LAMD 017 FIC. SEP 09'8/ REQUEST FOR ALLOWABLE ----AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS 256441-06 O. C. D. PROBATION SPRICE ARTESIA OFFICE Operator McKay Oil Corporation Post Office Box 2014, Roswell, New Mexico 88201 cosun(s) for filing (Check proper box) Other (Please explain) X New Well Change in Transporter of: 1 - completion Oil Dry Cae - bongs in Ownership! Casinghead Gas Condensute 'I change of ownership give name and address of previous owner ____ DESCRIPTION OF WELL AND LEASE Well No. Fool Name, Including Formation Kind of Lense Lease 4 State, Federal or Fee 36190 Eppers Federal W. Pecos Slope Abo NM 25 Location 675 1650 West South Line and Feet From The Feet From The Unit Letter 35 5S Range 21E , NMPM, Chaves T waship Co: Line of Section DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Andress (Give address to which approved copy of this form is to be sent) Address (Give address to which approved copy of this form is to be sent) tione of Authorized Transporter of Casinghead Gas [] or Dry Gas [X Post Office Box 2014, Roswell, NM New Mexico Gas Marketing, Inc. Unit When Is gas actually connected? TWP. If well produces oil or liquids, 22<u>E</u> **ASAP** 1 36 6S No If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Cas Well New Well Workover Plug Back Same Resty, Diff. ft. O11 Well Designate Type of Completion - (X) Х P.B.T.D. Date Spudded Date Compl. Heady to Prod. Total Depth 3333' 7-22-87 3400 2-14-87 Top Oil/Gas Pay Name of Producing Formation Tubing Depth levations (DF, RKB, RT, GR, etc.) 2801 2777**'** Abo 4306' GR Depth Casing Shoe rectorations 2801 - 3167.5 TUBING, CASING, AND CEMENTING RECORD HOLE SIZE SACKS CEMENT CASING & TUBING SIZE DEPTH SET 929 515 sxs. 8 578' 41211 3396 325 sxs. + 250 7 7/8" 2 3/8 2777 (Test must be after recovery of total volume of load oil and must be equal to or exceed top able for this depth or be for full 24 hours) TEST DATA AND REQUEST FOR ALLOWABLE OH, WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Hun To Tanks Date of Test Choke Size Casing Pressure Tubing Pressure Length of Teel Actual Prod. During Test OII-Bble. Water - Bble. GAS WELL Cravity of Condensate Actual Frod. Tool-MCF/D Length of Test Bble. Condensate/MMCF 4 hrs. 514 Choke Size Cosing Pressure (6but-16) Tubing Presewe (Shut-im) Testing Method (pitot, buck pr./ 6/64 - 12/64750 746 back pr. **DIL CONSERVATION DIVISION** PERTIFICATE OF COMPLIANCE APPROVED_ hereby certify that the rules and regulations of the Oil Conservation Division have been compiled with and that the information given bove is true and complete to the best of my knowledge and belief. BY. TITLE. This form is to be filed in compliance with BULE 1104. If this is a request for allowable for a namely drilled or desp Theresa Rodugu well, this form must be accompanied by a tabulation of the devia All sections of this form must be filled out completely for all able on new and recompleted wells. Production Analyst

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STATE OF NEW MEXICO Form C-104 Revised 10-1-78 RIGY AND MINITIALS DEPARTMENT OIL CONSERVATION DIVISION ** ** 1**** ****** RECEIVED 01516161/1104 P. O. DOX 2088 BANTA FE SANTA FE, NEW MEXICO 87501 P 14. 0 SEP 09'87 LAND OFFICE REQUEST FOR ALLOWABLE ---AND O. C. D. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS ARTESIA, OFFICE PADRATION GFFICE Chermon McKay Oil Corporation Post Office Box 2014, Roswell, New Mexico 88201 "casun(s) for liling (Check proper box) Other (Please explain) Change in Transporter of: X Oil Dry Can in completion Condensate Change in Ownershi, Castnahead Gas Tchange of ownership give name and address of previous owner.... WEIL AND LEASE | Well No. | Foot Name, Including Formation Kind of Lense Legee State, Federal or Fee 36190 4 W. Pecos Slope Abo Eppers Federal Location West South Line and *6*75 1650 Feet From The Feel From The Unit Letter , NMPM, Chaves Range 21E Col 35 T waship 5S Line of Section DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Andress (Give address to which approved copy of this form is to be sent) Hane of Authorized Transporter of Cil or Condensate Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Castniched Gas ar or Dry Gas X Post Office Box 2014, Roswell, NM 88201 New Mexico Gas Marketing, Inc. When Rq. is gas actually connected? Twp. Unit , Sec. if well produces oil or liquids, **ASAP** 6S 22E G 36 If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Workover Plug Back Same Resty, Diff, R. Gas Well OII Well Designate Type of Completion - (X) X Total Depth P.B.T.D. Date Compl. Heady to Prod. Date Spudded 3333' 3400 7-22-87 2-14-87 Tubing Depth Top Oil/Gas Pay Name of Producing Formation i.lovations (DF, RKB, RT, GR, etc., 2777' 2801 Abo 4306' GR Depth Casing Shoe rectorations 2801 - 3167.5 TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE DEPTH SET HOLE SIZE 929 515 sxs. 12七 325 sxs. + 2503396 41/211 7 7/8" 2 3/8" 2777 (Test must be after recovery of total volume of load oil and must be equal to or exceed top a able for this depth or be for full 24 hours) TEST DATA AND REQUEST FOR ALLOWABLE OLL WELL Producing Riethod (Flow, pump, gas lift, etc.) Date First New Olf Hun To Tanks Date of Test Choke Stre Casing Pressure Tubing Pressure Length of Test Gas - MCF Water - Dble. OII-Bble. Actual Prod. During Test GAS WELL Gravity of Condensate Bbls. Condensate/MMCF Actual Fred. Toot-MCF/D Length of Test 4 hrs. 514 Chote Size Cosing Pressure (Shut-in) Tubing Presewe (Shut-in) Teiting Method (pitot, buck pr.) 6/64 - 12/64750 746 back pr. **DIL CONSERVATION DIVISION** PERTIFICATE OF COMPLIANCE APPROVED_ hereby certify that the rules and regulations of the Oil Conservation livision have been complied with end that the information given base is true and complete to the best of my knowledge and belief. BY. TITLE. This form is to be filed in compliance with MULE 1104. If this is a request for allowable for a newly drilled or desp Theresa Roduque well, this form must be accompanied by a tabulation of the devia

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STATE OF NEW MEXICO Form C-104 Revised 10-1-78 ECEIVED RIGY AND MINERALS DEPARTMENT OIL CONSERVATION DIVISION ** ** ****** P. O. DOX 2088 1011 A IN UT 104 1441478 SANTA FE, NEW MEXICO 87501 SEP 09 87 / (L) 1/ 0.0.0. O, C. D. LAND DEFICE REQUEST FOR ALLOWABLE ARTESIA, OFFICE -AND UAS AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS PROBATION SPFICE Cherulat McKay Oil Corporation Addiess Post Office Box 2014, Roswell, New Mexico 88201 Other (Please explain) X New Well OIL Dry Gas incompletion. Condensule Casinghead Gas Change in Ownership [__] I change of ownership give name and address of previous owner, DESCRIPTION OF WELL AND LEASE well No. Fool Name, Including Formation Kind of Lense Legee 36190 State, Federal or Fee 4 W. Pecos Slope Abo Eppers Federal £16 pegtion 675 West 1650 South Line and Feet From The L. Feet From The Unit Letter Co. Chaves 5S Range 21E , NMPM, 35 qidem T Line of Section ESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Home of Authorized Transporter of Cil Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Castinghead Gas or Dry Gas X Post Office Box 2014, Roswell, NM 88201 New Mexico Gas Marketing, Inc. Rqe. Is gas actually connected? Unit TTWP. If well produces oil or liquide. **ASAP** · 36 No · 22E 6S eve location of tunks. If this production is commingled with that from any other lease or pool, give commingling order number COMPLETION DATA Same Heaty, Diff. It Deepen Oil Well Gas Well Workover Plug Back Designate Type of Completion - (X) Х P.B.T.D. Total Depth Date Compl. Heady to Prod. Date Spudded 3333' 34001 7-22-87 2-14-87 Tubing Depth Top Oil/Gas Pay Name of Producing Formation Lievations (DF, RKB, RT, GR, etc., 2777 **'** 2801 Abo 4306' GR Depth Casing Shoe arforations 2801 - 3167.5TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE 515 sxs. 929 8 5/8" 325 sxs. + 250 41211 3396 7 7/8 2777 2 3/8" (Test must be after recovery of total valume of load oil and must be equal to or exceed top a able for this depth or be for full 24 hours) FEST DATA AND REQUEST FOR ALLOWABLE HL WELL Producing Method (Flow, pump, gas lift, etc.) Date of Test Dute Faret New Oll Hun To Tanks Choke Size Casina Pressure Tubing Pressure Length of Teet Gas - MCF Water - Bble. Oil-Bble. Actual Pred. During Test GAS WELL Gravity of Condensate Bble. Condensate/MMCF Actual Frod. Tool-MCF/D Length of Test 4 hrs. 514 Choke Size Casing Pressure (Shut-in) . esting Method (pitot, buck pr.) Tubing Presews (Shut-in) 6/64 - 12/64 750 746 back pr. **DIL CONSERVATION DIVISION** PERTIFICATE OF COMPLIANCE hereby certify that the rules and regulations of the Oil Conservation livinion have been complied with and that the information given bove is true and complete to the best of my knowledge and belief. APPROVED DY. TITLE . This form is to be filed in compliance with RULE 1104, If this is a request for allowable for a newly drilled or deep Theresa Rodrigu well, this form must be accompanied by a labulation of the devictories taken on the well in accordance with AUCE 111.

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