Revised 1-1-89 See Instructions at Bottom of Page

P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DI

P.O. Box 2088

7504-2088

DISTRICT III	Santa re, New Mexico	87
000 Rio Brazos Rd., Aztec, NM 87410		

I.	RE	QUEST FO	OR ALLOV	WABLE AND AUTHORIZ	ATION	
Operator				OIL AND NATURAL GAS	S Well API No.	
Xeric Oil & Ga	s Corpo	ration	v		_ · ·	
1			_		30-005-20325	
Reason(s) for Filing (Check proper	box)	ite III	l, Mid	land, Texas 79701		
New Well	 ,	Change in 1	Transporter of:	Other (Please explain)	
Recompletion	Oil		Dry Gas		•	
Change is Operator X	Casing		Condensate [
If change of operator give name and address of previous operator	Burk Roy	alty Co	D., P.C). Box BRC, Wichi	4 - N-11	
II. DESCRIPTION OF W	ELL AND L	EASE			ta Falls, Texas 76307	
Double "L" Quee	TR 3 n Unit	Well No.	Pool Name, Inc	cluding Formation	Kind of Lease Lease No.	
Location	0112.6	<u></u>	ponpie	"L" Queen Associated	State, Federal or Fee MM-0199070-A	
Unit Letter O	:	330F	eet From The	SouthLine and 231	0 Fact	
Section 31 To	waship	14S R	lange 30	E Norma		
III. DESIGNATION OF T	D 4 5 100 0 0 0 0 0				Chaves County	
III. DESIGNATION OF T	KANSPORT	ER OF OIL	AND NAT	TURAL GAS		
Navajo Refining Con	many X	or Condensat		Address (Give address to which	approved copy of this form is to be sent)	
Name of Authorized Transporter of	Catinghead Gas	X or	Dry Gas	AITES	Sla. New Meyica posti area	
GHM Gas Corporatio	n	(25) 01	DIJ Car	I THE TOTAL TO THE PARTY OF THE PARTY IN WILLIAM		
If well produces oil or liquids, give location of tanks.	Unit	Sec. Tv	vp. Rg	ge. Is gas actually connected?	rtiesville, Oklahoma 7400	
	I H	1 36 11	40.205		When ?	
If this production is commingled with IV. COMPLETION DATA	that from any of	her lease or pool	i, give commir	ngling order number:		
Designate Type of Complet	ion - (X)	Oil Well	Gas Well	New Well Workover D	eepen Plug Back Same Res'v Diff Res'v	
Date Spudded		ol. Ready to Pro	<u> </u>	1 i i -	eepen Plug Back Same Res'v Diff Res'v	
		w veeny to tito	e.	Total Depth	P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.)	Name of P	roducing Format	Lion	Top Oil/Gas Pay		
Perforations					Tubing Depth	
					Depth Casing Shoe	
	<u>-</u>	LIDING CH	GIV G		Since	
HOLE SIZE	CAS	ING & TUBING	SING AND	CEMENTING RECORD		
		IN G TOBIN	J SIZE	DEPTH SET	SACKS CEMENT	
					Part ID-3	
					10-22-93	
V. TEST DATA AND REQUI	FOT FOD A	LOWARE			Thy 40	
OIL WELL (Test must be after	TECOVERY of India	TOWARD	E a.u.			
Date First New Oil Run To Tank	Date of Test	Total of 1002	a ou and must	De equal to or exceed top allowable	for this depth or be for full 24 hours.)	
Length of Test			l	Producing Method (Flow, pump, gas	lift, etc.)	
	Tubing Press	ure		Casing Pressure	Choke Size	
Actual Prod. During Test	Oil - Bbls.			Water - Bbls.	Gu- MCF	
GAS WELL					Od- MCF	
Actual Prod. Test - MCF/D						
THE PART MICHE	Length of Tes	ı		Bbls. Condensate/MMCF	Gravity of Condensale	
esting Method (pitot, back pr.)	Tubing Present	ping Pressure (Shut-in)			Gravity of Condensate	
		•		Casing Pressure (Shut-In)	Choke Size	
VI. OPERATOR CERTIFIC	ATE OF C	OMDI IAN	ICE -			
veluly that the files to a man	TOTAL VEHILLA CITE THE SAME AND CONTRACTOR OF THE SAME		OII CONSED	IVATION DIVISION		
Division have been complied with and that the information given above a true and complete to the best of my knowledge and belief.			.	OIL CONSEN	AN HOM DIVISION	
The state of the s	knowledge and b	elief.		Data Approved	OCT 1 1 1993	
_ K (Date Approved	1393	
Signature				By		
Printed Name	RANDALL CAPPS PRES.			OF HOMAL SIGNED HY		
10/01/93	10/01/93 915_683 3171			MIKE WILLIAMS Title SUPERVISOR, DISTRICT II		
Date		Telephone No		SUPERVISO	H, UISTRICT 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
- 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.