jubmit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico ergy, Minerals and Natural Resources Depart

PELEIVED

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

001 - 8 1993

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

Santa Fe, New Mexico 87504-2088

C. C. D.

I.	REQUEST FO	OR ALLOWAI ANSPORT OII					•		
Орегасот						Well API No.			
Xeric Oil & Gas C		30-005-60183							
200 North Loraine	, Suite 111	ll, Midlar							
Reason(s) for Filing (Check proper box) New Well	Channe in	Tonanana	Othe	r (Please exp	lain)				
New Well Change in Transporter of: Recompletion Oil Dry Gas Dry									
Change in Operator	Casinghead Gas	Condensate							
If change of operator give name and address of previous operator Burk Royalty Co., P.O. Box BRC, Wichita Falls, Texas 76307									
II. DESCRIPTION OF WELL		,							
Lease Name TR		1 -			of Lease No.		ease No.		
Double "L" Queen U	nit 12	Double "L	" Queen i	Associat	ed State,	Federal or Fee	B-104	118-78	
Unit Letter J : 1650 Feet From The South Line and 2310 Feet From The East Line									
Section 25 Township	p 14S	Range 29E	, NM	IPM,		Chaves		County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS									
Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)									
Navajo Refining Compan Name of Authorized Transporter of Casing	Drawer 159, Artesia, New Mexico 88211-0159					-0159			
GPM Gas Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 5050, Bartlesville, Oklahoma 74005					nu) a 74005			
If well produces oil or liquids, give location of tanks.	Unit Sec.	Twp. Rge. 145 29E	is gas actually connected? When						
If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA									
Designate Type of Completion -	- (X)	Gas Well	New Well	Workover	Deepen	Plug Back Sar	ne Res'v	Diff Res'v	
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	rations (DF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth		
Perforations	!			Depth Casing Shoe					
	CEMENTING RECORD								
HOLE SIZE	CASING & TU	DEPTH SET			4 SAC	A SACKS CEMENT			
					Port ID-3				
<u> </u>					10-22-93				
				**·····	eng y				
V. TEST DATA AND REQUEST FOR ALLOWABLE OIL 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 First New Oil Run To Tank	Producing Method (Flow, pump, gas lift, etc.)								
Length of Test	Tubing Pressure	Casing Pressure			Choke Size				
Actual Prod. During Test	Oil - Bbls.		Water - Bbis.			Gas- MCF			
GAS WELL									
Actual Prod. Test - MCF/D	Length of Test		Bbls. Condensa	e/MMCF		Gravity of Conde	m en l o		
	- 	Sold College William							
esting Method (pitot, back pr.)	Tubing Pressure (Shut-ii	Casing Pressure (Shut-in)			Choke Size	Choke Size			
I. OPERATOR CERTIFICA	TE OF COMPI	JANCE					· · · · · · · · · · · · · · · · · · ·		
I hereby certify that the rules and regulations of the Oil Conservation			OIL CONSERVATION DIVISION						
Division have been complied with and the is true and complete to the best of my kn	Date Approved OCT 1 1 1993								
//									
Signature RANDALL CAPPS	By ORIGINAL SIGNED BY								
RANDALL CAPPS PRES. Printed Name Title 10/01/93 915-683-3171			MIKE WILLIAMS Title SUPERVISOR, DISTRICT II						
Date		none No.							

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.