

Energy Codes
District I
P.O. Box 1981, Hobbs, NM 88240
District II
P.O. Drawer 80, Artesia, NM 88210

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division
P.O. Box 8088
Santa Fe, New Mexico 87504-8088
REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Form O-104
Revised 1-1-89
RECEIVED

JAN 12 '90

I. Operator: Artesia Oil Corporation Well/API No.: O. C. D. ARTESIA, OFFICE

Address: P.O. Box 898, Artesia, New Mexico 88210 Telephone No.: (505) 749-2468

Reasons for Filing (Check proper box) ___ Other (Please explain)
New Well ___ Change in Transporter of:
Receptor ___ Oil ___ Dry Gas ___
Change in Operator ___ Gashead Gas ___ Condensate ___

If change of operator give name and address of previous operator: J. B. Adanson, P.O. Box 727, Artesia, NM 88210

II. DESCRIPTION OF WELL AND LEASE
Lease Name: Reyno Well No.: 1 Pool Name, including Formation: Red Lake - Queen - Grayburg Kind of Lease: State, Federal or Gas Lease No.: 847
Location: Unit Letter M: 890 Feet From The S Line and 330 Feet From The W Line. Sec 31 T. 17S, R. 89E, NMPA, Eddy County.

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Authorized Transporter of Oil ___ or Condensate ___
Navajo Refining Co. Address-Give address to which approved copy of this form is to be sent: 501 E. Main Street, Artesia, New Mexico 88210
Authorized Transporter of Gashead Gas ___ or Dry Gas ___
Address-Give address to which approved copy of this form is to be sent: _____
If well produces oil or liquids, Unit (Sec. 175 or 288) ___ Is gas actually connected? ___ When? ___
give location of tanks

If this production is commingled with that from any other lease or pool, give commingling order number: _____
IV. COMPLETION DATA

Designation	Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res	
Date Spudded	/ /	Date Compl. Ready to Prod	/ /	Total Depth	P.S.T.D.					
Elevations	Producing Formation		Top Oil/Gas Pay		Tubing Depth					
Perforations						Depth Casing Shoe				

TUBING, CASING AND CEMENTING RECORD

Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement

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

Date First New Oil Run to Tank	/ /	Date of Test	/ /	Producing Method	<u>Tested I.D. 3</u>
Length of Test	Tubing Press	Casing Pressure	Choke Size	<u>1-3/8" ID</u>	
Actual Prod. During Test	Oil - Bbl	Water - Bbls.	Gas - MCF	<u>21950</u>	

GAS WELL
Actual Prod Test - MCF/D Length of Test Bbls. Condensate/MCF Gravity of Condensate
Testing Method Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke size

VI. 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.
W. E. Chase January 12, 1990
W. E. Chase, Production Clerk Date

OIL CONSERVATION DIVISION
Date Approved JAN 22 1990
By MIKE WILLIAMS
Title SUPERVISOR, DISTRICT II