DISTRIBUT ON NEW MEXICO OIL CONSERVATION COM ON Form C -104 INTA FE REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-116 ILE Effective 1-1-65 AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS E D .s.g.s. AND OFFICE TRANSPORTER GAS AUG 9 1974 OPERATOR PRORATION OFFICE Operator O. C. C. ARTESIA, OFFICE Fleyd Sherrell Reute 1 Rex 200 Artesia, New Mexico 88210 Reason(s) for filing (Check proper box) Other (Please explain) New Well Change in Transporter of: · honer Dry Gas Recompletion Oil Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND LEASE Well No.: Pool Name, Including Formation State, Federal or Fee Fleyd Sherrell Three Mile San Andres Location 2080 Feet From The Sept. Line and 2200 Unit Letter Feet From The Line of Section 32 Township 17 Range , NMPM, Eddy III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent) Nevale Crude Oll Purchasing Co. Address (Give address to which approved copy of this form is to be sent or Dry Gas Is gas actually connected? When Unit Sec. Twp. Ege. If well produces oil or liquids, give location of tanks. 32 17 If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Plug Back Oil Well Gas Well New Well Same Res'v. Diff. Res'v. Workover Designate Type of Completion - (X) Date Spudded Date Compl. Ready to Prod. Total Depth Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation 1790 Top Oil/Gas Pay Tubing Depth 3389 (Perforations SAN ANDRES Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD 17421 - 17541 16201 - 15861 HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 9 7/8" 12851 450 sx <u>5å</u>" 7 7/8 17901 100er (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) V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date of Test	Producing Method (Flow, pur	Producing Method (Flow, pump, gas lift, etc.)	
Tubing Pressure	Casing Pressure	Choke Size	
Cil-Bbis.	Water - Bbls.	Gas - MCF	
	Tubing Pressure	Tubing Pressure Casing Pressure	Tubing Pressure Casing Pressure Choke Size

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

OIL CONSERVATION COMMISSION

Lease No.

County

AUG 9 1974 APPROVED

OIL AND GAS INSPECTOR TITLE .

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, ell name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply