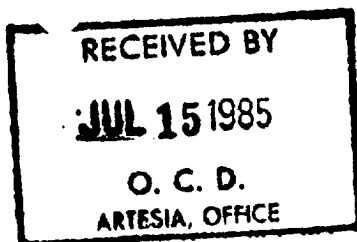


STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator METEX PIPE & SUPPLY

Address POB 1037 ARTESIA, NM 88210

Reason(s) for filing (Check proper box)

<input checked="" type="checkbox"/> New Well	Change in Transporter of:	
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>Ronadero Federal</u>	Well No. <u>3</u>	Pool Name, including Formation <u>N. Sq. Lake G/B SA</u>	Kind of Lease State, Federal or Fee <u>Fed.</u>	Lease No. <u>NM 54423</u>
Location				
Unit Letter <u>M</u> <u>Lot 13</u> ; <u>2970</u> Feet From The <u>South</u> Line and <u>1270</u> Feet From The <u>West</u>				
Line of Section <u>4</u> Township <u>16S</u> Range <u>31E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>Navajo Refining Co. (Pipeline Division)</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Drawer 159 Artesia, NM 88210</u>	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>Phillips Petroleum Co.</u>	Address (Give address to which approved copy of this form is to be sent) <u>4001 Penbrook Odessa, Tx. 79762</u>	
If well produces oil or liquids, give location of tanks.	Unit <u>J</u>	Sec. <u>4</u>
	Twp. <u>16S</u>	Rge. <u>31E</u>
Is gas actually connected?		When
<u>Yes</u>		<u>7-9-85</u>

If this production is commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Martin B. Muncy
(Signature)
Martin B. Muncy d/b/a Metex Pipe & Supply
(Title)
7-11-85
(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 18 1985, 19
BY Original Signed By
Mike Williams
TITLE Oil & Gas Inspector

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, well name or number, or transporter, or other such change of condition.

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

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well XX	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 5-16-85	Date Compl. Ready to Prod. 7-9-85		Total Depth 3655		P.B.T.D. 3608				
Elevations (DF, RKB, RT, GR, etc.) 4143.7' GL	Name of Producing Formation Premier-Grayburg		Top Oil/Gas Pay 3506		Tubing Depth 3550				
Perforations Sand-Jet 4-Holes @ 3506 & 4-Holes @ 3526 8-Holes Total						Depth Casing Shoe 3655			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/4"	8-5/8" 24#		310'		250-Sxs "C" <u>CIRCULATED</u>				
7-7/8"	5 1/2" 17#		3655'		1200-Sxs "C" <u>CIRCULATED</u>				
2-3/8" EUE 8-Rd	Tbg. set at 3550'								

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 Tanks 7-9-85	Date of Test 7-10-85	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24-hrs	Tubing Pressure -	Casing Pressure -	Choke Size -
Actual Prod. During Test 18	Oil - Bbls. 17	Water - Bbls. 1	Gas - MCF 10

GAS WELL

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