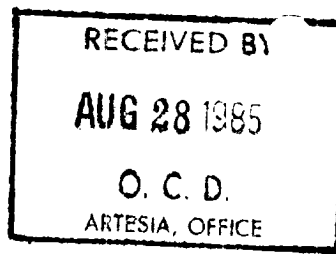


STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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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  
Dickson Petroleum, Inc. ✓

Address  
P. O. Box 50160, Midland, Texas 79710

Reason(s) for filing (Check proper box)

<input checked="" type="checkbox"/> New Well	Change in Transporter of:	Other (Please explain)
<input type="checkbox"/> Recompletion	<input checked="" type="checkbox"/> Oil	CASINGHEAD GAS MUST NOT BE FLARED AFTER <u>10-3-85</u> UNLESS AN EXCEPTION FROM THE B. L. M. IS OBTAINED
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name Holly "A" Federal	Well No. 1	Pool Name, Including Formation Square Lake GR-SA	Kind of Lease State, Federal or Fee Federal	Lease No. NM-53376
Location				
Unit Letter <u>E</u> : <u>2115</u> Feet From The <u>North</u> Line and <u>330</u> Feet From The <u>West</u>				
Line of Section <u>31</u> Township <u>16-South</u> Range <u>30-East</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"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum Company-Trucks	4001 Pembroke, Odessa, Texas 79762
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>E</u> Sec. <u>31</u> Twp. <u>16S</u> Rge. <u>30E</u>	<u>Post ID-2</u> <u>9-6-85</u> <u>Comp + BK</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.

Arden Dickson  
(Signature)  
President  
(Title)  
8-21-85  
(Date)

OIL CONSERVATION DIVISION  
AUG 30 1985  
APPROVED \_\_\_\_\_, 19\_\_\_\_  
Original Signed By  
BY Los A. Clements  
TITLE Supervisor District II

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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 7/26/85	Date Compl. Ready to Prod. 7/30/85 8-51-85		Total Depth 2860'		P.B.T.D. 2830'				
Elevations (DF, RAB, RT, CR, etc.) 3695 GR	Name of Producing Formation Grayburg		Top Oil/Gas Pay 2549'		Tubing Depth 2800'				
Perforations 1 shot per foot with 4" Jumbo Jet (Dresser) 2549,50,51; 2599; 2600; 2714,15,17,19,22,24,35, and 36.							Depth Casing Shoe		
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/4"	8 5/8" 24#		350'		300 sxs Class C				
7 7/8"	5 1/2" 17#		2860'		400 Lite				
					300 sxs Class C				
	27/8								

#### 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 8/17/85	Date of Test 921/85	Producing Method (Flow, pump, gas lift, etc.) Pumping 1 1/4" 10" Trico	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure	Choke Size Full
Actual Prod. During Test	Oil - Bbls. 20	Water - Bbls. 100	Gas - MCF TSTM

#### GAS WELL

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