

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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

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OIL CONSERVATION DIVISION

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SANTA FE, NEW MEXICO 87501

APR 14 1986

O. C. D. REQUEST FOR ALLOWABLE  
AND  
ARTESIAN PERMIT TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
J. Cleo Thompson

Address  
4500 Republic Bank Tower, Dallas, Texas 75201

Reason(s) for filing (Check proper box) Other (Please explain)

<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

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name West Square Lake Unit Tr. 6	Well No. #8	Pool Name, including Formation Square Lake (GB-SA)	Kind of Lease State, Federal or Fee Fed	Lease No. LC 063926
Location				
Unit Letter N	Feet From The 660	South Line and 2615 2485	Feet From The West	
Line of Section 35	Township 16S	Range 29E	NMPM, Eddy	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)
Navajo Refining Company	Box 159, Artesia, New Mexico 38210
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Phillips Petroleum	Bartlesville, Oklahoma
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
P 13 T16S 30E	Yes 3-14-86

If this production is commingled with that from any other lease or pool, give commingling order number: No

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.

*J. Carrady*  
(Signature)

Agent

(Title)

3-31-86

(Date)

OIL CONSERVATION DIVISION

APPROVED SEP 5 1986, 19

BY Original Signed By  
Les 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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded			Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
9-19-85			3-27-86		4000			3289		
Elevations (DF, RKB, RT, CR, etc.)		Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth		
3661 GL		GB-SA			2971			3601		
Perforations								Depth Casing Shoe		
3187 -2971										

#### TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2	2 3/8		
17 1/2	13 3/8	507	650 sxs C 2% CACL
	5 1/2	3990	2375 sxs C 4% gel
	2 7/8	3601	

#### 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 3-18-86	Date of Test 3-18-86	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs	Tubing Pressure 45	Casing Pressure 45	Choke Size
Actual Prod. During Test 26	Oil - Bbls. 26	Water - Bbls. 153	Gas - MCF 31

#### 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