

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.S.	<input type="checkbox"/>
LAND OFFICE	<input type="checkbox"/>
TRANSPORTER	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PRODUCTION OFFICE	<input type="checkbox"/>

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

JUN - 3 1987

REQUEST FOR ALLOWABLE  
AND

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Spectrum 7 Exploration Company	
Address P. O. Box 10626, Midland, Texas 79702	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	ADD Change in Transporter of: <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

If change of ownership give name  
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name State "24"	Well No. 1	Pool Name, including Formation E. Red Lake Queen GB	Kind of Lease State, Federal or Fee	Lease No. State LG-3965
Location Unit Letter <u>O</u> <u>1980</u> Feet From The <u>East</u> Line and <u>660</u> Feet From The <u>South</u> Line of Section <u>24</u> Township <u>16-S</u> Range <u>28-E</u> , 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"/> Navajo Refining Company	Address (Give address to which approved copy of this form is to be sent) P. O. Drawer 159, Artesia, NM 88210
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Conoco, Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 90, Maljamar, NM 88264
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? Yes When 5/12/87 Post ID-3

If this production is commingled with that from any other lease or pool, give commingling order number: 6-12-87

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.

Jim McAninch  
(Signature)  
Engineer  
(Title)  
May 27, 1987  
(Date)

OIL CONSERVATION DIVISION

JUN 1 0 1987

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY Les A. Clements  
TITLE Superintendent

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 multiple completed wells.

#### IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Fill, Res'v.
		X							
Date Spudded 12/02/86	Date Compl. Ready to Prod. 1/10/87	Total Depth 2250'				P.B.T.D. 1682'			
Elevations (DF, RKB, RT, GR, etc.) 3571.0' GR	Name of Producing Formation Penrose	Top Oil/Gas Pay 1537'				Tubing Depth 1604'			
Perforations 1537', 39', 53', 54', 55', 56', 62', 63', 74', 75', 97', 99'						Depth Casing Shoe 1740'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12-1/4"	8-5/8"		327'		250 SX				
7-7/8"	5-1/2"		1740'		196 SX				
	2-3/8"		1604'						

#### 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 1/22/87	Date of Test 2/15/87	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure 0	Casing Pressure 0	Choke Size
Actual Prod. During Test 12 bbls	Oil-Bbls. 10 BO	Water-Bbls. 2 BW	Gas-MCF 65 MCF

#### 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