

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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JUN 24 1987

O. C. D.
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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 Terra Resources, Inc.	
Address 10 Desta Drive, Ste. 500 West Midland, Texas 79705	
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	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <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 PENNZOIL "9" Fed.	Well No. #1	Pool Name, including Formation Diamond Mound (Atoka)-Morrow	Kind of Lease State, Federal or Fee Federal	Lease No. NM-30067
Location Unit Letter C : 1980 Feet From The West Line and 660 Feet From The North Line of Section 9 Township 16S Range 28E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Marathon Petroleum Company	Address (Give address to which approved copy of this form is to be sent) 539 S. Main Findlay, OH 45840								
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Transwestern Pipeline Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2018 Roswell, NM 88201								
If well produces oil or liquids, give location of tanks.	<table border="1"> <tr> <td>Unit</td> <td>Sec.</td> <td>Twp.</td> <td>Rge.</td> </tr> <tr> <td>C</td> <td>9</td> <td>16S</td> <td>28E</td> </tr> </table>	Unit	Sec.	Twp.	Rge.	C	9	16S	28E
Unit	Sec.	Twp.	Rge.						
C	9	16S	28E						
Is gas actually connected?	When								
YES	6-22-87								

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.

Shirley Cyprian
(Signature)

Operations Engineer

(Title)

6/22/87

(Date)

OIL CONSERVATION DIVISION

APPROVED DEC 19 1988, 19

BY Original Signed By

TITLE Mike Williams

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 XX	New Well XX	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 4-15-87	Date Compl. Ready to Prod. 5-25-87	Total Depth 9555'			P.B.T.D. 9467'				
Elevations (DF, RKB, RT, GR, etc.) 3642.7 GR	Name of Producing Formation Atoka	Top Oil/Gas Pay 8978' 8972'			Tubing Depth 8860'				
Perforations 8972 - 9019							Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8	300	320 sx C1 "C"
11 "	8-5/8	1800	200 sx "C", 400 sx Dowell mix
7-7/8 "	5-1/2	9555	840 sx Lightweight, 160 sx
	2 7/8	8860	50/50 FOZ, 300 sx Lightweight
			100 sx "C" Neat

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D 1000	Length of Test 24 hours	Bbls. Condensate/MMCF 1.5	Gravity of Condensate 51°
Testing Method (pilot, back pr.) Back press.	Tubing Pressure (shut-in) 2375	Casing Pressure (shut-in) 0	Choke Size 11/64

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