Submi: 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

RECEIVED

Form C-104 Revised 1-1-89 See Instructions
APR - 3 1991 at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

## OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	Santa Fe, New Mexico 87504-2088						O. C. D. ARTESIA, OSSICO		
I.	REQUEST	FOR ALLC	)WA	BLE AND	AUTHOF	RIZATION			
Operator / O TRANSPORT OIL AND NATURAL GAS									
Vintage Drilling Co. V									
P.O. Box 158, L		f 88255							
Reason(s) for Filing (Check proper box) New Well		in Transporter of	of:	Ou	her (Please exp	olain)			
Recompletion Change in Operator	Oil [	Dry Gas							
If change of operator give name and address of previous operator	Casinghead Gas [	Condensate		) Pov 10	27 2540	cia NM	88210		
II. DESCRIPTION OF WELL AND LEASE									
Lease Name	ing Formation		Kind	of Lease	<del></del> i	Lease No.			
Pegasus Fed Location		North	Squ	arelake	Q-G-SA	X	, Federal MKPEKX	j	1 2507
Unit LetterM	_:2970	_ Feet From Ti	be	South Lin	e and63	35	eet From The	West	; Line
Section 6 Townsh	31E	•			Eddy				
III. DESIGNATION OF TRAN	SPORTER OF C	Range	A 77 77		144 IVI	<del></del>			County
trains or ventorized Hamibottes of Off	Address (Give address to which approved copy of this form is to be sent)					ent)			
Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be s								38210	
If well produces oil or liquids,	-						copy of this form :	is to be se	int)
ive location of tanks. E 6 16S 31			<b>Rge.</b> 31E	is gas actually No		When	7		
If this production is commingled with that IV. COMPLETION DATA	from any other lease or	pool, give com	mingli	ng order numb	er:			<del></del>	
Designate Type of Completion	Oil Well	Gas We	eil	New Well	Workover	Doepen	Plug Back Sam	e Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to	Prod.		Total Depth		i	P.B.T.D.		<u> </u>
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/Gas Pay			1.0.1.0.		
Elevations (DF, RKB, RT, GR, etc.)  Name of Producing Formation  Perforations				Top Old Gat Pay			Tubing Depth		
							Depth Casing Sho	×e .	<del></del>
1101 5 0175	TUBING,	CASING A	ND (	TEMENTIN	G RECORI	D			
HOLE SIZE	HOLE SIZE CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT		
V. TEST DATA AND REQUEST FOR ALLOWABLE  OIL WELL (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 Tank									
Date First New Oil Run To Tank	Producing Method (Flow, pump, gas lift, etc.)								
Length of Test	Tubing Pressure	Casing Pressure		··········	Choke Size	rtes	IID-		
								1 - 12 6) . i	1-91
	Oil - Bbis.			Water - Bbis.			Gas-MCF OF GALG		
GAS WELL Actual Prod. Test - MCF/D			<u>-</u> -	····		<del></del> -		····	
TOUR PIOU TEST - MCF/D	Length of Test	Bbls. Condensate/MMCF			Gravity of Condensate				
ssting Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size		
I. OPERATOR CERTIFICATE OF COMPLIANCE									
I hereby certify that the rules and regulations of the Oil Conservation				OIL CONSERVATION DIVISION					
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				Date ApprovedAPR 9 1991					
7 7 1/ 2				Date A	rhbroved		APR 9 199	<u>'</u>	
Signature				By ASPANCE SAGNED BY NEAR WILLIAMS					
Printed Name / Title				Title SUPERVISOR, DISTRICT IT					
Date 7/2/9/	(505) 74 Teleph	48-2941 hone No.		11110					

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter or other such changes.