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Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

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

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

RECEIVED

JAN 28 '91

O. C. D.  
ARTESIA, OFFICE

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Mewbourne Oil Company	Well API No. 30-015-26302
Address P. O. Box 7698, Tyler, Texas 75711	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name FEDERAL "R"	Well No. 1	Pool Name, Including Formation Logan Draw Atoka	Kind of Lease <input checked="" type="checkbox"/> State, Federal <input type="checkbox"/> Other	Lease No. NM-20351
Location				
Unit Letter M	: 1190	Feet From The West	Line and 660	Feet From The South
Section 17	Township 17S	Range 27E	NMPM,	Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Amoco Pipeline Inter- corporate Trucking	<input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) Oil Tender Dept.Box 702068, Tulsa, OK 74170-2068				
Name of Authorized Transporter of Casinghead Gas Northern Natural Gas Company	<input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 2223 Dodge Street, Omaha, Nebraska				
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 17	Twp. 17S	Rge. 27E	Is gas actually connected? No	When ? February, 1991

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X	X					
Date Spudded 3/13/90	Date Compl. Ready to Prod. 6/23/90	Total Depth 9120'	P.B.T.D. 9074'					
Elevations (DF, RKB, RT, GR, etc.) KB 3383', GL 3367.6'	Name of Producing Formation Atoka	Top Oil/Gas Pay 8626'	Tubing Depth 8505'					
Perforations 8626-38'	Depth Casing Shoe --							
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		340'		600			
11"	8-5/8"		1825'		1350			
7-7/8"	4-1/2"		9120'		1900			

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 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 1,110	Length of Test 24 hours	Bbls. Condensate/MMCF 111,000:1	Gravity of Condensate 43°
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 1550#	Casing Pressure (Shut-in) ---	Choke Size 12/64"

VI. OPERATOR 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 above is true and complete to the best of my knowledge and belief.

  
Signature  
Gaylon Thompson, Engineering Operations Sec.  
Printed Name  
1/25/91  
Date  
(903) 561-2900  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved \_\_\_\_\_  
By \_\_\_\_\_  
Title \_\_\_\_\_

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.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.