

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1940, 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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Mewbourne Oil Company	Well Approval RECEIVED
Address P.O. Box 5270 Hobbs, New Mexico 88241	
Reason(s) for Filing (Check proper box) ☐ New Well ☐ Change in Transporter of: ☐ Recompletion ☐ Oil ☐ Dry Gas ☐ ☐ Change in Operator ☐ Commingled Gas ☐ Condensate ☐	
If change of operator give name and address of previous operator _____	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Vandagriff "26" Federal	Well No. 1	Pool Name, including Formation Vandagriff Keyes Queen	Kind of Lease State, Federal or BLM	Lease No. NM-83066
Location Unit Letter <u>L</u> : <u>2140</u> Feet From The <u>West</u> Line and <u>1667</u> Feet From The <u>North</u> Line Section <u>26</u> Township <u>16S</u> Range <u>28E</u> NMPM Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Commingled Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)	
Conoco Inc.	10 Nesta Dr. St. 627 Midland, Tx 79705	
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 26
	Twp. 16S	Rgn. 28E
	Is gas actually connected? ☒ When?	

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 Hole	Diff Hole
		X	X					
Date Spudded 07/08/94	Date Compl. Ready to Prod. 08/17/94	Total Depth 2,202'	P.B.T.D. 1,940'					
Elevations (DF, MKB, AT, GR, etc.) 3653' GR	Name of Producing Formation Lower Penrose	Top Oil/Gas Pay 1,527'	Tubing Depth 1,571'					
Performances 1527' - 1537' 2 SPF			Depth Casing Shoe 2,202'					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8" 24# J-55		305'		200 sx. circ.			
7-7/8"	4-1/2" 10.5# J-55		2202'		935 sx. circ.			

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 30	Length of Test 24 Hours	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (psst, back pr.) 30 psi Back Pres.	Tubing Pressure (Start-in) 0	Casing Pressure (Start-in) 130	Choke Size 1/4"

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.

Erik L. Hoover
Signature
Erik L. Hoover Engineer
Printed Name
August 22, 1994 (505) 393-5905
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 30 1994

By _____

Title SUPERVISOR DISTRICT II

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.