

Robert S. Coates
District 1
P.O. Box 1920, Hobbs, NM 88240
District 11
P.O. Drawer 80, Artesia, NM 88210

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division
P.O. Box 2082
Santa Fe, New Mexico 87504-2082
REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Form O-104
RECEIVED Used 1-1-89

JAN 12 '90

A. C. D.
ARTESIA, OFFICE

Operator: Arrowhead Oil Corporation ✓	Well API No.:
Address: P.O. Box 548, Artesia, New Mexico 88210	Telephone No.: (505) 748-2436
Reason(s) for Filing (Check proper box) ☐ New Well ☐ Recombination ☒ Change in Operator ☐ Change in Transporter of: ☐ Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐ Other (Please explain)	

If change of operator give name and address of previous operator J. B. Adamson, P.O. Box 727, Artesia, NM 88210
II. DESCRIPTION OF WELL AND LEASE

Lease Name Sinclair State	Well No. 1	Pool Name, Including Formation Square Lake - Grayburg S.A.	Kind of Lease State, Federal or See	Lease No. E-950
Location: Unit Letter P: 990 Feet From The S Line and 330 Feet From The E Line. Sec 9 T 17S, R 29E, NMPM, Eddy County.				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Authorized Transporter of Oil ☒ or Condensate ☐ Navajo Refining Co.	Address-Give address to which approved copy of this form is to be sent 501 E. Main Street, Artesia, New Mexico 88210				
Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address-Give address to which approved copy of this form is to be sent				
If well produces oil or liquids, give location of tanks	Unit P	Sec. 9	Twp. 17S	Rge. 29E	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 Res'v	Diff Res
Date Spudded / /	Date Compl. Ready to Prod / /	Total Depth			P.B.T.D.			
Elevations	Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

Hole Size	Casing & Tubing Size	Depth Set	Backs Cement

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)
OIL WELL

Date First New Oil Run to Tank / /	Date of Test / /	Producing Method	
Length of Test	Tubing Pres	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbl	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke size

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.

January 12, 1990

Lab E. Chase, Production Clerk

Date

OIL CONSERVATION DIVISION

Date Approved JAN 22 1990

By
ORIGINAL SIGNED BY
Title MIKE WILLIAMS
SUPERVISOR, DISTRICT 11