|   | ~   |                          |                               | -1                                 |                 |                                      | C                | SF_          |
|---|---|--------------------------|-------------------------------|------------------------------------|-----------------|--------------------------------------|------------------|--------------|
| -   |   | State of N               | ew Mexico                     |                                    | 1               |                                      | Form C-J         |              |
| Subnit 5 Copies<br>Appropriate District Office<br>DISTRICT J  | Energy, M   | ural Resour              | ces Departm                   | ent<br>beis                        | EIVED           | Revised 1<br>See Instru<br>at Bottom | iction +         |              |
| P.O. Box 1980, Hobbs, NM 88240                                | OIL C   | OIL CONSERVATION DIVISI  |                               |                                    |                 |                                      |                  | U            |
| DISTRICT.II<br>P.O. Drawer DD, Anteria, NM 88210              | Sa  | P.O. Bo<br>ita Fe, New M | ox 2088<br>exico 875          | 04-2088                            | SEP             | - 1 1992                             |                  |              |
| DISTRICT III<br>1000 Rio Brazos Rd., Aziec, NM 87410          | REQUEST FO  | OR ALLOWAE               | BLE AND                       | AUTHORI<br>TURAL GA                | ZATIQN.         | المية الور المعد                     |                  |              |
| Uperator  |   |                          |                               |                                    | Well 7          | UPI No.                              |                  |              |
| Mack Energy Corpor  | ation 🗸   |                          |                               |                                    | <u> </u>        |                                      |                  |              |
| Address<br>P.O. Box 276, Arte                                 | sia, NM 8821  | 0                        |                               | er (Please expla                   |                 |                                      |                  |              |
| Reason(6) for Filing (Check proper box)<br>New Well           | Change in   | Transporter of           | ()                            |                                    |                 |                                      |                  |              |
| Recompletion  | Oil   | Dry Gas                  | Eff                           | ective 8,                          | /1/92           |                                      |                  |              |
| Diange in Operator XX<br>change of operator give name Mark    | Casinghead Gas  |                          | P. O. Dr                      | awer 217                           | , Artesi        | a, NM 88                             | 3210             |              |
| la addicia di picticas operator                               |   | poración                 |                               |                                    |                 |                                      |                  |              |
| I. DESCRIPTION OF WELL<br>Lease Name                          | UPTION OF WELL AND LEASE<br>Well No. Pool Name, Inclusti  |                          |                               |                                    |                 |                                      | B-12             | se No.<br>66 |
| G-J West Coop Unit  | 28  | Grbg Jack                | son SR C                      | Grbg SA                            | l,              |                                      | <u> </u>         | 00           |
| ocation Unit LetterL  | :1650   | Feet From The            | south Lin                     | e and <u>9</u>                     | 90 Fø           | et From The                          | west             | Lin          |
| Section 22 Townshi  | p 17S   | Range 29E                | , N                           | MFM,                               |                 | Eddy                                 |                  | County       |
| U. DESIGNATION OF TRAN  |   | LAND NATU                | RAL GAS                       |                                    |                 |                                      |                  | <b>.</b>     |
| I. DESIGNATION OF TRAIN                                       | or Condens  |                          | / Autom Con                   |                                    |                 | copy of this form                    |                  | )            |
| Navajo Refining Co<br>Name of Authorized Transporter of Casin | chead Gas X   | or Dry Gas               | Addines (Gis                  | address to wh                      | ich approved    | NM 8821                              | n is lo be sent, | )            |
| GPM Corporation   |   |                          | 4001 Penbrook, Odessa         |                                    | Odessa,         |                                      | <u>ک</u>         |              |
| f well produces oil or liquids,<br>ve location of tanks.      | Unit Sec.   | Twp. Rge.                | is gas actual                 | y connected i                      |                 | ·                                    |                  |              |
| this production is commingled with that                       | from any other lease or p   | ool, give comming        | ing order num                 | ber:                               |                 |                                      | · <u> </u>       |              |
| V. COMPLETION DATA  | Oil Well  | Gas Well                 | New Well                      | Workover                           | Deepen          | Plug Back S:                         | ame Res'v        | Diff Res'v   |
| Designate Type of Completion                                  | - (X)<br>Date Compl. Ready to   | <br>Prod.                | Total Depth                   | L                                  |                 | P.B.T.D.                             | l                |              |
| Jate Spudded  |   |                          | Top Oil/Gas                   | Dav                                |                 | Tubing Depth                         |                  |              |
| Elevations (DF, RKB, RT, GR, etc.)                            | Name of Producing For   | Producing Formation      |                               | 1 op on on ++1                     |                 | Tubing Depth                         |                  |              |
| soularions  |   |                          |                               |                                    |                 | Depth Casing S                       | Shoe             |              |
|   | TUBING,   | CASING AND               | CEMENTI                       | NG RECOR                           | D               | <u> </u>                             |                  |              |
| HOLE SIZE   | CASING & TUBING SIZE  |                          | DEPTH SET                     |                                    |                 | SACKS CEMENT                         |                  |              |
|   |   |                          |                               |                                    |                 |                                      |                  |              |
|   |   |                          |                               |                                    |                 |                                      |                  |              |
| . TEST DATA AND REQUE   | ST FOR ALLOWA   | BLE                      | I                             |                                    |                 | l                                    | Gill 24 hours    | 1            |
| IL WELL (Test must be after 1                                 | Date of Test  | of load oil and must     | be equal to or<br>Producing M | exceed top allo<br>ethod (Flow, pu | mp, gas lift, e | ic.)                                 | sted I           | D-C          |
| Dale First New Oil Run To Tank                                |   |                          |                               |                                    |                 | Choke Size $hc-1/-42$                |                  |              |
| ength of Test   | Tubing Pressure   | Tubing Pressure          |                               | Casing Pressure                    |                 | ang a                                |                  |              |
| Actual Prod. During Test                                      | Oil - Bbls.   |                          | Water - Bbls.                 |                                    | Gas-MCF         |                                      |                  |              |
|   | <u> </u>  |                          | ]_,                           |                                    |                 | I                                    |                  |              |
| GAS WELL<br>Journal Frod. Test - MCF/D                        | Length of Test  | ength of l'est           |                               | Bbls. Condensate/MMCI              |                 | Gravity of Condensate                |                  |              |
|   |   | ubing Pressure (Shut-m)  |                               | Casing Pressure (Shut-in)          |                 | Clicke Size                          |                  |              |
| usting Method (pitot, back pr.)                               | Lubing Pressure (Snut-1   |                          |                               |                                    |                 |                                      |                  |              |
| I. OPERATOR CERTIFIC  | ATE OF COMPL  | LANCE                    | 0                             | DIL CON                            | SERVA           | TION DI                              | VISION           | 1            |
| I hereby certify that the rules and regula                    | ations of the Oil Conservations of the Oil Conservation of the Information given                                | uon                      |                               |                                    |                 |                                      |                  |              |
| is the and complete to the bed of the                         | nowedge and belief  |                          | Date                          | Approvec                           |                 |                                      | <b>Y</b> .       |              |
| Rhonda Nelson   |   |                          | URIGINAL SIGNED               |                                    |                 |                                      |                  |              |
| Signature   | Production (  | lerk                     | By                            | f                                  | SUPERVIS        | OR, DISTRI                           | CTI              | _            |
| Rhonda Nelson<br>Pring Name 8 1992                            |   | litte                    | Title.                        |                                    |                 |                                      |                  |              |
|   | the second se | -3303<br>hone No.        |                               |                                    |                 |                                      | الكرية بيسيريون  |              |
| Date  | •   |                          |                               |                                    |                 |                                      |                  |              |

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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

2) All sections of this form must be filled out for allowable on new and recompleted wells. 2) All sections of this form must be fined out for anowable on new and recompleted webs.
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.