RECEIVED Energy, Minerals and Natural Resources Department 12 '89 Submit 5 Copies Appropriate District Office DISTRICT I rorm C-104 Revised 1-1-89 See Instructions P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION er DD, Artesia, NM 88210 O. C. D. Santa Fe P.O. Box 2088 Santa Fe, New Mexico 87504-2088 ARTESIA, OFFICE Transporter DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 Gas REQUEST FOR ALLOWABLE AND AUTHORIZATION Operator TO TRANSPORT OIL AND NATURAL GAS I. Operator Devon Energy Corporation (Nevada) 1500 Mid America Tower, 20 North Broadway, Oklahoma City, Oklahoma 73102 Other (Please explain) Reason(s) for Filing (Check proper box) Change in Transporter of: New Well Operator Name Change Dry Gas Recompletion Oil Casinghead Gas Condensate Change in Operator If change of operator give name and address of previous operator II. DESCRIPTION OF WELL AND LEASE Name, Including Formation Grayburg Jackson St-Q-9-54 State, Federal or Fee Lease No. Well No. Pool Name, Including Formation "J" Sta<u>te</u> B-14831 Etz Location Feet From The South 1980 East 330 Feet From The Line Unit Letter Eddy 30E 17S NMPM, County 16 Township Range III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil or Condensate me of Authorized Transporter of Oil or Conden Texas-New Mexico Pipeline Company P.O. Box 1510, Midland, Texas 79701 Address (Give address to which approved copy of this form is to be sen!) Name of Authorized Transporter of Casinghead Gas or Dry Gas X P.O. Box 2197, Houston, Texas 77252 Conoco, Inc. is gas actually connected? When? Sec Unit F Twp. Rg 17S 30E Rge. If well produces oil or liquids, give location of tanks. 16 Yes If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Deepen | Plug Back | Same Res'v | Diff Res'v New Well Workover Oil Well Gas Well Designate Type of Completion - (X) P.B.T.D. Date Spudded Date Compi. Ready to Prod. Top Oil/Gas Pay Name of Producing Formation Tubing Depth Elevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD

Testing Method (pitot, back pr.)

Tubing Pressure (Shut-in)

V. TEST DATA AND REQUEST FOR ALLOWABLE

Date of Test

Oil - Bbls.

Tubing Pressure

Length of Test

VI. OPERATOR CERTIFICATE OF COMPLIANCE

1 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 J. Duc!

HOLE SIZE

Date First New Oil Run To Tank

OIL WELL

Length of Test

GAS WELL

Actual Prod. During Test

Actual Prod. Test - MCF/D

Duckworth, District Engineer
Tule

June 8, 1989 (405) 235-3611

Date Telephone No.

OIL CONSERVATION DIVISION

Gas- MCF

Gravity of Condensate

SACKS CEMENT

Date Approved _______ JUN 1 4 1989

By ORIGINAL SIGNED BY

DEPTH SET

Producing Method (Flow, pump, gas lift, etc.)

MIKE WILLIAMS
SUPERVISOR, DISTRICT IS

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.

(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.)

Casing Pressure

Water - Bbls

Bbls. Condensate/MMCF

Casing Pressure (Shut-in)

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

CASING & TUBING SIZE

- 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.