

Submit 5 Copies  
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

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

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

RECEIVED

MAY 20 1991

O. C. D.  
ARTESIA, OFFICE

Operator Xeric Oil & Gas Company	Well API No.
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Address P.O. Box 51311, Midland, TX 79710	RECEIVED
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Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	Other (Please explain) <input type="checkbox"/>	MAY 30 1991 O. C. D. ARTESIA, OFFICE
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If change of operator give name and address of previous operator General Operating Company P.O. Box 877 Wichita Falls TX. 76307

II. DESCRIPTION OF WELL AND LEASE			
Lease Name G-J Unit Tract 7A	Well No. 1	Pool Name, including Formation Grayburg-Jackson-SR-Q-G-S	Kind of Lease State, Federal or Fee
Location Unit Letter <u>G</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u> Line Section <u>26</u> Township <u>17-S</u> Range <u>30-E</u> <u>NMRM</u> <u>Eddy</u> County		Lease No. LC028992a	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS					
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) Navajo Refining Company P.O. Box 159, Artesia, NM 88210				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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	Sec	Twp	Rge	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'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth			
Perforations						Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				

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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	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.	
Signature <u>Gary S. Barker</u>	Operations Mgr.
Printed Name <u>Gary S. Barker</u>	Title <u>915-683-3171</u>
Date <u>May 13, 1991</u>	Telephone No.

OIL CONSERVATION DIVISION	
Date Approved <u>JUN - 3 1991</u>	
By <u>ORIGINAL SIGNED BY</u>	
<u>MIKE WILLIAMS</u>	
Title <u>SUPERVISOR, DISTRICT II</u>	

INSTRUCTIONS: This form is to be filed in compliance with Rule 111.

- 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.