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P.O. Box 1980, Hobbs, NM 88240
DISTRICT II
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DISTRICT III
000 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

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MAY 20 1991

MAY 30 1991

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

O. C. D.
ARTESIA, OFFICE

O. C. D.
ARTESIA, OFFICE

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

| | | | |
|---|---------------|---|--|
| I. DESCRIPTION OF WELL AND LEASE | | | |
| Lease Name G-J Unit Tract 2 | Well No. 8 | Pool Name, including Formation Grayburg-Jackson-SR-Q-G-S | Kind of Lease State, Federal or Fee |
| Location Unit Letter L : 1980 Feet From The South Line and 660 Feet From The West Line Section 26 Township 17-S Range 30-E NMPM Eddy County | | | Lease No. LC060528e |

| | | | |
|---|--|---|----------------------------|
| II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS | | | |
| Name of Authorized Transporter of Oil Navajo Refining Company | or Condensate <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) P.O. Box 159, Artesia, NM 88210 | |
| Name of Authorized Transporter of Casinghead Gas | 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: | | | |

| | | | |
|-------------------------------------|-----------------------------|-----------------|-------------------|
| V. 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 |
| | | | 2054.10-3 |
| | | | 5-2-81 |
| | | | Chg - 08 |

| | | | |
|--|---------------------------|---|-----------------------|
| . TEST DATA AND REQUEST FOR ALLOWABLE | | | |
| IL WELL (Test must be after recovery of total volume of load on 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 |
| Producing Method (pilot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |

| | |
|---|-----------------------|
| I. 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 Gary S. Barker | Operations Mgr. |
| Printed Name May 13, 1991 | Title 915-683-3171 |
| Date | Telephone No. |

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

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.