Appropriate District Of DISTRICT | P.O. Box 1980, Hobbs, NM 88240

Energy, minerals and manufal resources pep " and

OIL CONSERVATION DIVISION P.O. Box 2088

OCT 22 '90

RECEIVED

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 DISTRICT MI 1000 Rio Brazos Rd., Aziec, NM 87410

Santa Fe, New Mexico 87504-2088

O. C. D.

L	REC	QUEST F	OR A	MOTIV	ABLE AN	D AUTHO	RIZATIO	MRTESIA, OF	FICE		
Operator		TOTAL	ANSI	OHIO	IL AND N	IATURAL	GAS				
SOUTHWEST ROYALTIES, INC.							"	Well API No. 30-015-20640			
407 N. Big Spring, S	Suite 3	00, Mid	land	Teva	s 7970	.1			0040		
Remoths) for Puing (Check proper box))	<u> </u>		, ICAA		Other (Please ex					
New Well Recompletion		Change is	Trans	orter of:	· ·	MEI (FIEDS E	uplaul)				
Change in Operator	Oil Catingh	cad Gas []	Dry G			_					
If change of operator give name and address of previous operator PH			Conde			fective		Septembe	r 1, 19	90	
	100115	PETROLI	CUM (COMPAN	Y, 4001	Penbroo	k Stre	et. Odess	a, Texa	s 79762	
Lease Name #3 FEP	AND LE	Well No.	Boot h	la 2- 4							
Parke E Fed #3		3	Pool Name, Including Formation Fren Seven Rive					nd of Lease MeX Pederal or Fe			
Location H	1	1650						7,700121 (3-74	or pe-	E	
Unit Letter	— : <u>——</u>		Feet Fr	rom The _	orth L	ine and	90	Feet From The	East	- 1	
Section 22 Townsh	i p 17	'S	Range	301	Ξ,	NMPM,	Eddy			Line	
III. DESIGNATION OF TRAN	NCDO DOW	70 00 00								County	
III. DESIGNATION OF TRAN	19LOK I F	or Conden	LAN	D NATU	RAL GAS						
Mavajo Kerining Co. Piperine Div.					P O	Roy 150	which approx	ved copy of this f	orm is to be se	ent)	
Name of Authorized Transporter of Casin Phillip5 66 Natural (ghead Gas	XX	or Dry	Cau 🗀	Address (G	ive address to v	, AKTES	sia, NM red copy of this fo	88210		
# WOU DIOULCAS Oil or limids	Jas Co.	Sec.	Twp.	B	14001	Penbrool	k St	Odessa. '	TX 7976	62	
rive location of tanks	<u>н</u>	i i		1000		a) composite	₩ _b	ea ?			
If this production is commingled with that IV. COMPLETION DATA	from any oth	er lease or p	ool, giv	comming	ing order sur	ober:	L				
		Oil Well	G	as Well	New Well			~~~~~			
Designate Type of Completion Date Spudded		<u>i</u>	ì		İ	Workover	Deepea	Plug Back	Same Res'v	Diff Res'v	
·	Date Comp	pi. Ready to I	Prod.		Total Depth		<u> </u>	P.B.T.D.		1	
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay						
Perforitions								Tubing Depth			
								Depth Casing	Shoe		
	T	UBING, C	ASIN	G AND	CEMENTI	NG RECOR	D				
HOLE SIZE	CASING & TUBING SIZE			ZE	DEPTH SET			S	ACKS CEME	MT	
								 -			
. TEST DATA AND REQUES	I FOR A	LLOWAR	IF								
IL WELL (Test must be after re-	covery of sou	al volume of	load oil	and must b	t equal to ar	escred ton alla	rumble for th				
IL WELL (Test must be after recovery of total volume of load oil and must let First New Oil Run To Tank Date of Test						Producing Method (Flow, pump, gas lift, etc.)					
ength of Test	Tubing Press	RUTE			Casing Pressu			70			
ctual Prod. During Tod					Ticon			Choke Size	Choke Size		
Oil - Bbls.				Ī	Water - Bbls.			Gus- MCF			
GAS WELL											
ctual Prod. Test - MCF/D	Length of Te	est .			bis. Condens	ale/MMC F		10			
sting Method (pitot, back pr.) Tubing Pressure (Shut-in)					Casing Pressure (Shut-in)			Gravity of Condensate			
				7				Choke Size			
L OPERATOR CERTIFICA	TE OF (COMPLI	ANC	F	 -			1			
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 board.					С	IL CON	SERV	ATION D	IVISION	u	
is true and complete to the best of my kno	wiedge and	ation given al belief.	bove	- 1						•	
Sim Of a					Date Approved						
Signature					By						
L. M. Sanders Supv., Regulation & Proration					By Title For Record One.						
Printed Name 10-18-90	(91	נגד -368 (<u>5</u>			Title_		- Eo				
		Telephon									

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
- All sections of this form must be filled out for allowable on new and recompleted wells.
 Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 Separate Form C-104 must be filed for each pool in multiply completed wells.