STATE OF NEW MEXICO Form C-104 Revised 10-1-78 FIGY AND MINERALS DEPARTMENT ** ** ****** OIL CONSERVATION DIVISION RECEIVED CHIMIOUTION P. O. BOX 2088 V 5AH1A / E SANTA FE, NEW MEXICO 87501 116 V SEP 27 1982 U \$.U.\$. LAND DEFRE REQUEST FOR ALLOWABLE OIL V O. C. D. -AND ARTESIA, OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS OPENATION PAGRATION OFFICE Cleo Thompson c/o Oil Reports & Gas Services, Inc. Box 763, Hobbs, NM 88240 Reason(s) for tiling (Check proper box) Other (Please explain) XX New Well Change in Transporter of: Oil Dry Gos Recompletion Casinghead Gas Condensute Change in Ownership If change of ownership give name and address of previous owner DESCRIPTION OF WELL AND LEASE well No. Pool Name, Including Formation Kind of Lease Lease No. State, Federal or Fee State SquareLake - GB - SA Merrill State B - 3635Location 660 North Line and 1330 West Feet From The Unit Letter 2 17S 30E qiden. T Range NMPM, Eddy Line of Section DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS or Condensate Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Cil XX Navajo Crude Oil Purchasing Co. P. O.Box 159, Artesia, NM 88210 Address (Give address to which approved copy of this form is to be sent) Figure of Authorized Transporter of Casinghead Gas or Dry Gas Unit Sec. Trwp. Rae. Is gas actually connected? When If well produces oil or liquids, В 2 17S 30E NO give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Oil Well New Well Gas Well Workover Plug Eack Same Res'y, Dill. Res'y. Deepen Designate Type of Completion - (X) X X Date Compl. Ready to Prod. Total Depth P.B.T.D Date Soudded 8/13/82 9/16/82 3200 3189 210vations (DF, RKB, RT, GR, etc.) 3758.8 DF Name of Producing Formation Tubing Depth Top Oil/Gas Pay Grayburg-San Andres 2883 3087 Perforations 2883 - 3170 Depth Casing Shoe 3199 TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE DEPTHISET HOLE SIZE 12 1/4 8 5/8 505 300 7 7/8 5 1/2 3199 500 2 3/8 3087 (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) TEST DATA AND REQUEST FOR ALLOWABLE Pist ID-2 Producing Method (Flow, pump, gas lift, etc.) Date of Test Date First New Cil Run To Tanks 10-10-82 9/16/82 9/23/82 Pump 4 BK Chose Size Length of Test Tubing Pressure Casina Pressure Gim 24 hours Gas - MCF Water - Bble. Actual Prod. During Test CII-Bula 62 20 GAS WELL Gravity of Condensate Bbis. Condensate/MMCF Actual Prod. Toot-MCF/D Length of Test Choke Size Cosing Pressure (Chut-in) Testing wethod (pilot, back pr.) Tubing Preseure (Shut-in) OIL CONSERVATION DIVISION CERTIFICATE OF COMPLIANCE SEP 3 0 1982 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 beat of my knowledge and belief. Original Signed By BY

Men	es/a Dalles (Signorwa)	
	(Signalwa)	
	Agent	
	(Tule)	
	9/24/82	

(Date)

Leslie A. Clements Supervisor District II

This form is to be filed in compliance with BULE 1104,

If this is a request for silowable for a newly drilled or deopened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted walls,

FIII out only Sections 1, II. III, and VI for changes of owner well name or number, or transporter, or other such change of condition

Separate forms C-104 must be filed for each pool in multiple sixed wells.