Submit 5 Copies
Appropriate District Office
DISTRICT J P.O. Box 1980, Hobbs, NM 88240

G-J West Coop Unit

Unit Letter C : 990

28 Township

Location

State of New Mexico Energy, Minerals and Natural Resources Department

at Bottom of P

County

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

Eddy

SEP 0 1 1992

DISTRICT II P.O. Drawer DD, Antesia, NM 88210 O. C. D. DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Well API No. Operator Mack Energy Corporation Address 88210 P.O. Box 276, Artesia, NM Other (Please explain) Reason(s) for Filing (Check proper box) Change in Transporter of: New Well Effective 8/1/92 Dry Gas Recompletion Caringhead Gas Condensate Change in Operator XX If change of operator give name and address of previous operator Marbob Energy Corporation, P. O. Drawer 217, Artesia, NM 88210 II. DESCRIPTION OF WELL AND LEASE Kind of Lease Lease No. Well No. Pool Name, Including Formation Lease Name State Anderskor Frex B - 514

III. DESIGNATION OF TI		CIN ON	OIL AIT	0 11/21 0	Address (Give address to which	h approved copy of this form is to be sent)
Name of Authorized Transporter of (	Oil bear	or Cond	ensate		· ·	
Navajo Refining (	lo 🗀				P.O. Box 159, Ar	<u>tesia, NM 88210</u>
Name of Authorized Transporter of Casinghead Gas x or Dry Gas			Address (Give address to which approved copy of this form is to be sent)			
GPM Corporation		سما			4001 Penbrook, O	dessa, TX 79762
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When 7
give location of tanks.	:	i	1	i	(	1

29E

Grbg Jackson SR Q Grbg SA

, NMFM,

Feet From The north Line and 2070 Feet From The west

17S

Range

	(V)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completic		L			L	L	J <sub>1======</sub>	l	l	
Date Spudded	Date Compl. Ready to Prod.		od.	Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth				
Perforations				.1			Depth Casin	g Shoe		
		TUBING, C.	ASING AND	CEMENTI	NG RECOR	D				
HOLE SIZE		CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT		
				_			<del> </del>			

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tank Date of Test Choke Size Casing Pressure Tubing Pressure Length of Test Gas- MCF Water - Bbls. Actual Prod. During Test Oit - Bbls.

	GAS WELL Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensale/MMCF	Gravity of Condensate
		Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
ı				<u> </u>

## 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 liven above is true and complete to the best of my knowledge and belief.

Monda	Milson
Signature Rhonda Nelson	Production Clerk
AUG 2 8 1992	Tide 7 <i>48-3303</i>
Date	Telephone No.

## OIL CONSERVATION DIVISION

Date Approved SEP 1 1992 ORIGINAL SIGNED DE MIKE WILLIAMS SUPERVISOR. DISTRICT !! Title\_

CORE CONTRACTOR SERVICE AND THE BUTTON A S. Atta Agree 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
- 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.

H-19-91

Donal Space D

Heatron
1800-11172

Comp. Spectral

5806-41138

Latero Log

1800-41493

G-J West Coop Ut

NC Tops	Dcm 4/25/91
Tx Bx	3 Jos not sough
Queen	) High shart
San Andres	2404
Glorieia	3747