

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

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

AUG 28 1992

### REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

O. C. D.  
OFFICE

Operator SOCORRO PETROLEUM CO.		Well API No. IC-30-015- <del>70075</del> -91
Address P.O. Box 37, Loco Hills, NM 88255		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <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"/>	PLEASE MAKE RETROACTIVE BACK TO DATE OF FIRST PRODUCTION.
Recompletion <input type="checkbox"/>		
Change in Operator <input type="checkbox"/>		
If change of operator give name and address of previous operator		

### II. DESCRIPTION OF WELL AND LEASE

Lease Name TURNER "B"	Well No. 101	Pool Name, Including Formation Grayburg San Andres	Kind of Lease State, Federal or Fee	Lease No. LC-029395-B
Location Unit Letter <u>D</u> : <u>990</u> Feet From The <u>North</u> Line and <u>1150</u> Feet From The <u>West</u> Line Section <u>20</u> Township <u>17S</u> Range <u>31E</u> , NMPM, <u>Eddy</u> County				

### III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> TEXAS NEW MEXICO PIPE LINE CO.	Address (Give address to which approved copy of this form is to be sent) BOX 2528, HOBBS, NM 88241-2528					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> CONOCO	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1267, PONCA CITY OK 74603					
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 20	Twp. 17S	Rge. 31E	Is gas actually connected? YES	When? 7-28-92

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 6-7-92	Date Compl. Ready to Prod. 8-21-92	Total Depth 3857'	P.B.T.D. 3700'					
Elevations (DF, RKB, RT, GR, etc.) GL 2656'	Name of Producing Formation Grayburg San Andres	Top Oil/Gas Pay 3031	Tubing Depth 2966'					
Perforations 3031 - 3800'			Depth Casing Shoe 3856'					

### TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2"	13 3/8" 48# J55-8Rnd	367'	400Sx-Circ 108Sx to pit
12 1/4"	8 5/8" 24# J55-8Rnd	1246'	800Sx-Circ 125Sx to pit
7 7/8"	5 1/2" 14# J55-8Rnd	3856'	1100Sx-Circ 75Sx to pit
	2 7/8" Tbg	2966'	

### 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 7-18-92	Date of Test 8-21-92	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure	Casing Pressure 65#	Choke Size 25/64"
Actual Prod. During Test	Oil - Bbls. 48	Water - Bbls. 128	Gas - MCF 13

### 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 Robert G. Seitzler Prod. Manager

Printed Name 8-25-92 Title 505-677-3223

Date 8-25-92 Telephone No.

### OIL CONSERVATION DIVISION

Date Approved OCT 6 1992

By ORIGINAL SIGNED BY

MIKE WILLIAMS

Title SUPERVISOR, DISTRICT II

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 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.