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 Appropriate District Office  
 DISTRICT I  
 P.O. Box 1980, Hobbs, NM 88240

State of New Mexico  
 Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

RECEIVED

OCT - 7 1992

O. C. D.

ARTESIA OFFICE

DISTRICT II  
 P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
 1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
 TO TRANSPORT OIL AND NATURAL GAS

Operator SDX Resources, Inc.	Well API No. 3001527000
Address P. O. Box 5061 Midland, TX 79704	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of operator give name and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name Leonard B Federal	Well No. 5	Pool Name, Including Formation Grayburg Jackson-Grayburg SA	Kind of Lease <del>Oil</del> Federal <del>Gas</del>	Lease No. LC 057459
Location Unit Letter B : 990 Feet From The N Line and 2310 Feet From The E Line Section 33 Township 17S Range 29E, NMPM, Eddy 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"/> Navajo Refining Company	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 <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 5050 Bartlesville, OK 74004
If well produces oil or liquids, give location of tanks.	Unit   Sec.   Twp.   Rge.   Is gas actually connected?   When? B   33   17S   29E   NO   10/15/92

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 4/29/92	Date Compl. Ready to Prod. 9/10/92	Total Depth 3690' T.D.			P.B.T.D. 3250'			
Elevations (DF, RKB, RT, GR, etc.) 3544' G.L.	Name of Producing Formation Grayburg/San Andres	Top Oil/Gas Pay 2370			Tubing Depth 3011			
Perforations 2373, 2411, 22, 32, 46, 52, 88, 91, 2560, 63, 2611, 13, 40, 2643, 46, 61, 63, 65, 67, 2826, 70, 78, 94, 2902, 10, 26, 37, 59, 64, 71, 76, 83, 2992, 3003.							Depth Casing Shoe 3675	
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		322'		255 sx - Class C			
7 7/8"	5 1/2"		3690		900 sx - Lite C			
Part ID-2 10-23-92 comp 4 BK								

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 9/21/92	Date of Test 9/23/92	Producing Method (Flow, pump, gas lift, etc.) Pumping - Rod Pump 2 1/2" x 16'	
Length of Test 24 hours	Tubing Pressure 20	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 80	Water - Bbls. 20	Gas - MCF 40 MCF

**GAS WELL**

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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.

*Barbara E. Wickham*  
 Signature  
 Barbara Wickham Production Analyst  
 Printed Name  
 10/6/92 (915) 685-1761  
 Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved OCT 16 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.