<u>DİSTRICT I</u> P.O. Box 1980, Hobbs, NM 88240						~-•				structions	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	C	P.O. I				ATION DIVISION Box 2088 Mexico 87504-2088			MELEIVED		
DISTRICT III HOU Rio Brazos Rd., Aztec, NM 87410	n								7 1993	)	
		R ALLOWABLE AND AUTHORIZATI SPORT OIL AND NATURAL GAS									
I. Operator	<u>T</u>	O TRAN	NSPO	RTO	IL AND NA	TURAL G		APINA	⇒ U. 		
SOCORRO PETROLEUM CON	IPANY										
P.O. BOX 37, LOCO HI		MEXICO	88	3255	<u> </u>	(24)					
Reason(s) for Filing (Check proper box) New Well		Jhange in T	'ransnort	er of:	[] Ou	et (Please expl	lain)				
Recompletion	Oil		Dry Gas								
Change in Operator	Casinghead	Gas 🗌 C	Condensa	nte 🗌							
If change of operator give name and address of previous operator		·····					<u> </u>		· · · · ·		
II. DESCRIPTION OF WELL			hal Nag	a lachd	ling Formation		Kind	of Lease	······	ease No.	
H.E. WEST "A"		23			- JACKSC	)N		, Federal or Fe	e l	9426-A	
Location P	140		_		SOUTH	35		· · · ·			
Unit Letter	:	F	eet From		SOUTH Lin	e and <u>55</u>	F	eet From The	EAST	Line	
Section 4 Towns	hip 17S	R	ange	<u>31 E</u>	, NI	MPM, EI	DDY			County	
II. DESIGNATION OF TRA	NSPORTER	OF OIL	AND	NATU	RAL GAS						
Name of Authorized Transporter of Oil	X	r Condensat	<mark>۵</mark> ۲			e address to wi	••				
TEXAS NEW MEXICO PIP Name of Authorized Transporter of Casi			r Dry Ga			OX 2528, e address to wh			241-2528 form is to be s		
CONOCO INCOPORATED		•• ليما		-		OX 1267,					
If well produces oil or liquids, jve location of tanks.	Unit Se		wp.   75. j	<b>Rge.</b> 31 E	1		When		1-93		
This production is commingled with the						<u> /</u> her:				I	
V. COMPLETION DATA											
Designate Type of Completion		Dil Well	Gaa	Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl. I	Ready to Pr	 rod.		Total Depth	L <u></u> ,,	l	P.B.T.D.	I		
3-1-93		9-8-93				4308'			4237'		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth 3959'			
KB 3935' GRAYBURG					3259'	<u>+</u>	. <u> </u>	Depth Casing Shoe			
3530'-3427', 3399'-33							~	4	308'		
	the second data was not as a feature of the second data was not as a feature of the second data was not as a fe				CEMENTIN	DEPTH SET	D		SACKS CEM	ENT	
HOLE SIZE		<b>CASING &amp; TUBING SIZE</b> 13 - 3/8'' J-55				5951			250 SX Port 10-2		
7 - 7/8''		5 - 1/2" J-55			4308'			16009		19-93	
	2 - 7	2 - 7/8"			3959'			comp & BK			
. TEST DATA AND REQUE	ST FOR ALI	LOWAB	LE	<u>.</u>	I			.I		<u> </u>	
IL WELL (Test must be after )	recovery of total			ind must					or full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Test	10 02			-	hod (Flow, pur	np, gas lift, e	ic.)			
<u>9-10-93</u> zogih of Test		9-10-93 Tubing Pressure				PUMP Casing Pressure					
24HRS					20#						
Ictual Prod. During Test	Oil - Bbls.	10			Water - Bbis.	00		Gas- MCF			
		46			2	93		31.28		J	
GAS WELL	Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate			
isting Method (pitot, back pr.)	Tubing Pressur	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size			
		<u></u>			ı <b></b>			I			
1. OPERATOR CERTIFIC	_			E	0	IL CON	SERVA		DIVISIO	N	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					OIL CONSERVATION DIVISION						
is true and complete to the best of my l	mowledge and be	clicf.			Date	Approved	I		0 1223		
that 1 Am	1					• • • • • • •		AL BIONE			
and the second of the second sec					By ORIGINAL SIGNED BY						
Title					SUPERVISOR, DISTRICT I						
5 001 93	<u>(تا ردىن)</u>	<b>Tiu</b> 223			Title_						
Date		Telephon	e No.								

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.