	•••					-	N		i st a	d	51	
Submit 5 Copies Appropriate District Office	ł	Energy, Mi	S inerals	tate of No and Nati	ew Mexico ural Resourc	es Departm	ent í	RECEIVED) •104 1-1-89 ructions	GT	
DISTRICT I P.O. Box, 1980, Hobbs, NM 88240	OIL CONSERVAT				TION I	FION DIVISION			9 3	m of Page		
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	P.O. Box Santa Fe, New Mex				$\begin{array}{c} \text{ox } 2088 \\ \text{exico} 8750 \end{array}$	4-2088	C.	C. L. D.	<i>2</i> . 1			
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	REQU	EST FO					ZATION [^]	alline, She	* *			
I. Operator	TO TRANSPORT OIL							API №. -015-2734	5			
Mack Energy Corporation		00011	1250									
P.O. Box 1359, Artes1 Reason(s) for Filing (Check proper box)	a, <u>NM</u>	88211-1 Change in T		nter of:	Oth	er (Please explo	zin)					
Recompletion	Oil		Dry Gai Conden					·				
Change in Operator	Casinghea											
II. DESCRIPTION OF WELL	AND LE	SE		1	ng Formation		Kind	of Lease		ase No.		
Lease Name GJ West Coop Unit						SR QN GB	Cinta	Penden Northe	B-	2.55		
Location Unit LetterL	.:1	<u>650 </u> 1	Feet Fre	om The	outh Lin	and <u>99(</u>) F	eet From The _	West	L	ine	
Section 16 Township	175	l	Range	<u>29E</u>	, NI	MPM,		Eddy	·	County	<u> </u>	
III. DESIGNATION OF TRANS		R OF OII		D NATU	RAL GAS	e address 10 wi	uch approved	t copy of this fo	rm is to be se	ni))	
Navajo Refining Comp	Company				P.O. DI	awer 159	Artes	sia, NM	ia. NM 88211-0159 copy of this form is to be sent)			
Name of Authorized Transporter of Casing GPM Gas Corporation					4001 Pe	4001 Penbrook, Odessa,				<u></u>		
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. B 28 17S 29E				is gas actually connected? When ' Yes			7 5/23/93				
If this production is commingled with that f				A COLUMN TWO IS NOT	A contraction of the second	Der:						
IV. COMPLETION DATA		Oil Well		ias Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res	ı'v	
Designate Type of Completion - Date Spudded		X N. Ready to I	 Prod.	<u>.</u>	X Total Depth		<u> </u>	P.B.T.D.				
3-15-93	5-15-93				4353' Top Oil/Gas Pay			4326 [*] Tubing Depth				
Elevations (DF, RKB, RT, GR, etc.) 3590.6' RKB	Name of Producing Formation Grayburg San Andres				2623'			3798 ¹ Depth Casing Shoe				
Perforations	<u>1010/0416_220_000000000000000000000000000000000</u>							· · ·	4332 1			
2623-3768'	TUBING, CASING AND				CEMENTI	NG RECOR	D					
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			<u>S</u>	SACKS CEMENT			
17 1/2 "	<u>13 3/8 "</u> 8 5/8 "			836'			-	450				
<u>12 1/4 "</u> 7 7/8 "	5 1/2 "			43321				1200	<u>8X</u>			
V. TEST DATA AND REQUES	TEODA	$\frac{2}{110WA}$	<u>'8 "</u>		l <u></u>	3798'					J	
V. TEST DATA AND REQUES OIL WELL (Test must be after re	covery of lo	ial volume oj	f load o	il and must	be equal to or	exceed top allo	owable for th	is depth or be fo	r full 24 hou	rs.)	-71	
Date First New Oil Run To Tank	Date of Test				Producing M	sunoa (riow, pi	μηφ, χας τητ,	eic.)	8-1	ID- 2-9	3	
5-23-93	5-26-93 Tubing Pressure			Pumping Casing Pressure			Choke Size Camp & BIY					
Length of Test 24 hours							Gas-MCP					
Actual Prod. During Test	Oil - Bbls.				Water - Bbis.				70			
218	<u> </u>	38			<u></u>	180	<u></u>		•			
GAS WELL Actual Prod. Test - MCF/D	Length of Test				Bbis. Condensate/MMCF			Gravity of C	Gravity of Condensate			
Festing Method (pilot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size	Choke Size			
		COMPI	IAN	ICE							J	
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					OIL CONSERVATION DIVISION							
is true and complete to the best of my knowledge and belief.					Date ApprovedAUG 6 1993							
Crisso D. Carte					By ORIGINAL SIGNED BY							
Signature Crissa Carter Production Clerk Printed Name Title					Title							
Printed Name <u>7/15/93</u> (505) 748-1288 Date Telephone No.					Title							

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N.

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 charges 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.