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

DISTRICT II
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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

RECEIVED

JUL 30 1993

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

| | | |
|---|---|-------------------------------------|
| Operator Mack Energy Corporation | | Well API No. 30-015-27358 |
| Address P.O. Box 1359, Artesia, NM 88211-1359 | | |
| 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 GJ West Coop Unit | Well No. 113 | Pool Name, including Formation Grayburg Jackson SR ON GB SA | Kind of Lease State, Federal, Private | Lease No. B-9563 |
| Location Unit Letter <u>E</u> : <u>2260</u> Feet From The <u>North</u> Line and <u>904</u> Feet From The <u>West</u> Line Section <u>21</u> Township <u>17S</u> Range <u>29E</u> , <u>NMPM</u> , <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"/> Navajo Refining Company | Address (Give address to which approved copy of this form is to be sent) P.O. Drawer 159, Artesia, NM 88211-0159 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> GPM Gas Corporation | Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, TX 79762 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit B | Sec. 28 | Twp. 17S | Rge. 29E | Is gas actually connected? Yes | When? 6/20/93 |

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 4-14-93 | Date Compl. Ready to Prod. 5-10-93 | | Total Depth 4456' | | P.B.T.D. 4406' | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3616.6' RKB | Name of Producing Formation Grayburg San Andres | | Top Oil/Gas Pay 2252' | | Tubing Depth 3806' | | | |
| Perforations 2252-3780' | | | | | Depth Casing Shoe 4434' | | | |
| TUBING, CASING AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 17 1/2" | 13 3/8" | | 132' | | 200 sx | | | |
| 12 1/4" | 8 5/8" | | 789' | | 450 sx | | | |
| 7 7/8" | 5 1/2" | | 4434' | | 1150 sx | | | |
| | 2 7/8" | | 3806' | | | | | |

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 6-20-93 | Date of Test 6-24-93 | Producing Method (Flow, pump, gas lift, etc.) Pumping | |
| Length of Test 24 hours | Tubing Pressure | Casing Pressure | Choke Size comp & BK |
| Actual Prod. During Test 291 | Oil - Bbls. 49 | Water - Bbls. 242 | Gas - MCF 80 |

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.

Crissa D. Carter

Signature
Crissa Carter
Printed Name
7/15/93
Date
Production Clerk
(505) 748-1288
Title
Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 6 1993

By ORIGINAL SIGNED BY
MARK WILLIAMS
Title SUPERVISOR DISTRICT I

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.