Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240
DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

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

AIG 24'90

DISTRICT III	Santa Fe, New N	Mexico 87504-2088	H90 Z-1 30
1000 Rio Brizzos Rd., Aztec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION			
I.	TO TRANSPORT OF	L AND NATURAL GAS	had been had
Operator Morexco, Inc. /		Wel	DAPI BOIA, OFFICE
Post Office Box 481, Artesia, New Mexico 88211-0481			
Reason(s) for Filing (Check proper box)	401, Altesia, New M	ex100 88211-0481	
Reason(s) for Filing (Check proper box) New Well Change in Transporter of: Change of Operator			
Recompletion	Oil Dry Gas	Effortive Aven	ator 1 1000
Change in Operator	Casinghead Gas Condensate	Effective Augu	st 1, 1990
If change of operator give mame Murphy Operating Corporation, P. O. Drawer 2648, Roswell, NM			
II. DESCRIPTION OF WELL AND LEASE			
Lease Name	Well No. Pool Name, Include	ding Formation Kin	d of Lease No.
State C Location	9 Art	esia-Q-GR-SA Su	e, Federal or FeState E-12873
Unit Letter M	: 990 Feet From The _	S Line and 660	Feet From TheLine
Section 14 Townshi	p 18S Range	28 E , NMPM,	Eddy County
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil	X or Condensate	Address (Give address to which approve	ad come of this form is to be seed
Navajo Refining			Artesia, NM 88210
Name of Authorized Transporter of Casing	ghead Gas or Dry Gas	Address (Give address to which approve	ed comp of this form is to be an all
		TO WHICH BEDDEN	ea copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.		. Is gas actually connected? Who	n ?
If this production is commingled with that		l No	0.50
If this production is commingled with that from any other lease or pool, give commingling order number: CTB 89 IV. COMPLETION DATA			
Designate Type of Completion	- (X) Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v Diff Res'v
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	
	The state of the s	100 010 011 129	Tubing Depth
Perforations			Depth Casing Shoe
TUBING, CASING AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS OFFICE
		02, 111921	SACKS CEMENT
V. TEST DATA AND REQUES	T FOR ALLOWABLE		
OIL WELL (Test must be after re	ecovery of total volume of load oil and mus	t be equal to or exceed top allowable for th	his depth or be for full 24 hours.)
Date First New Oil Run To Tank	Date of Test Producing Method (Flow, pump, gas lift, e		
Length of Test	Tubing Pressure	Casing Pressure	Choke Size Posted ID - = Gas-MCF Chag OP
Actual Prod. During Test	Oil - Bbis.	Water - Bbls	9-14-90
	On - Buis.	Water - Doig	Gas- MCF
GAS WELL	<u> </u>	<u> </u>	- congul
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	T.C.		
results Method (pack, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
VI. OPERATOR CERTIFICATE OF COMPLIANCE			
I hereby certify that the rules and regula	ations of the Oil Conservation	OIL CONSERVATION DIVISION	
Division have been complied with and that the information given above			
is true and complete to the best of my knowledge and belief.		Date Approved	SEP 1 4 1990
Petron Direc	~ ₄	Pare Approved	
Signature		By ORICINAL SIGNED BY	
Rebecca Dickson Production Analyst		MIKE WILLIAMS	
Printed Name		Title SUPERVISOR DISTRICT IF	
August 23, 1990 Date	(505) 746-6520 Telephone No.	SUFERMOUT, UISTRIG. IT.	

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 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.