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

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

JUN 0 7 1991

DISTRICT II P.O. Drawer DD, Artesia, NM 88210	P.O. Box 2088 Santa Fe, New Mexico 87504-208					
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	REQUEST FOR ALLOWABLE AND AUTHO					

STRICT III 10 Rio Brazos Rd., Aztec, NM 87410	REQUI	EST FC	R AL	LOWABL	E AND A	UTHOR	IZATIO	N		C. D.	<u>.</u>	
	TO TRANSPORT OIL AND NATURAL GAS					W W	Well API No.					
Avon Energy Corp.								30-0	115-054	46		
dress												
PO Box 37, Loco H	ills,	NM	882	.55	Othe	s (Please exp	dain)					
ason(s) for Filing (Check proper box)		Change in	Тталагос	orter of:								
w Well	Oil		Dry G									
econtributions —	Casinghead	Gas 🔲	Conde	neste 🗌								
change of operator give name d address of previous operator												
DESCRIPTION OF WELL A	ND LEA	SE	15. 15	lame, Includin	a Formation			Kind of	Lease		ease No.	
Turner "B" (B	١			ayburg-		n		State, F	ederal or Fee	LC02	9395-B	
Turner "B" (B		<u>59</u>				•	_			F+		
Unit LetterA	: 5	60	. Pect P	rom The No				Fee	From The	East	Line	
Section 29 Township	17S		Range	, 31E	, N	MPM, Ede	ay		,		County	
I. DESIGNATION OF TRANS	PORTE	R OF O	IL A	ND NATU	RAL GAS		which and	roued :	opy of this	orm is to be s	eni)	
lame of Authorized Transporter of Oil	IX XI	or Conde	nessie		VOTES (O.	ROW 75	<i>უი</i> ლი <i>აც</i> წ	lohh	s NM	88240)	
Texas-New Mexico P:	<u>ipeli</u>	<u>ne Co</u>	•	· Cot	Address (Gi	e address to	which app	roved o	copy of this j	form is to be s	ent)	
Name of Authorized Transporter of Casings	nead Gas	XX	or Dr	y Gas	P.O.	30x 46	0, Hc	bbs	, NM	88240		
Continental Oil Cor	npany Unit	Sec.	Twp.	Rge.	is gas actual	y connected	7	When	7			
ive location of tanks.	D	29		S 31E	Yes				12	/04/90		
this production is commingled with that fi	om any ot	ner lease or	pool, g	ive commingl	ing order nun	ber:					 ,	
V. COMPLETION DATA							- Dw	pen	Ping Rack	Same Res'v	Diff Res'v	
Designate Type of Completion -	(X)	Oil Wel	u j 1	Gas Well	New Well	Workove:			<u> </u>	1 /	_i	
Date Spudded	Date Compi. Ready to Prod.		Total Depth 3486 1				P.B.T.D. 3480'					
1/16/59	3/2/59		Top Oil/Gas Pay				Tubing Depth					
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation Grayburg San Andres					3453'						
3747	Gray	ourg	Sall	Allules	<u>'l</u>				Depth Cas	ng Shoe		
Perforations 3448-80, 3290-3314.	317	6-322	6. 3	3126-41	, 3080)						
3448-80, 3230-3314		TUBING	, CAS	SING AND	CEMENT	ING REC	ORD				APATE	
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT						
12-1/2"	10-3/4"		 	593'			150 sx 6-21-9/					
		5	-1/	2"		3486'			comp. PBK			
			3453'			Tarien -						
	m FOR	TILON	-3/	T	<u></u>							
V. TEST DATA AND REQUES OIL WELL (Test must be after n	TFOR	ALLUV	e of los	ici nd oil and mus	t be equal to	or exceed lop	allowable	for thi	s depth or b	e for full 24 h	ours.)	
OIL WELL (Test must be after n Date First New Oil Run To Tank	Date of T	od voten	e 07 100		Producing I	Method (Flow	v, pump, g	as lift, e	tc.)			
	Date of 1		'8/9	0		Pum	ping		T= : e:			
12/4/90 Length of Test	Tubing P		<u> </u>		Casing Pre	SELITE.			Choke Siz	.c		
24 hrs				-	. –	00#			Gas- MCI			
Actual Prod. During Test	Oil - Bbls.		Water - Bbis.				11					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			25			157						
GAS WELL		-: 							TA	Candanasia		
Actual Prod. Test - MCF/D	Length of Test		Bbis. Condensate/MMCF				Gravity of Condensate					
			(Charles Decome (Charles in)			Choke Size						
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)									
	'ATE C	F COM	APLI.	ANCE		011 0	ONIO!	=D\/	′ΔΤΙΩΝ	DIVIS	ION	
AL ODED ATOD CEDTIFIC	AIL				li .	OIL C	CINO		71101		. • . •	
VI. OPERATOR CERTIFIC	lations of t	he Oil Con	servatio	X 0.	11	Data Approved JUN 1 4 1991						
I hereby certify that the rules and regu	lations of that the in	he Oil Con formation (States w	X 0.					IIIN 1	4 1991		
VI. OPERATOR CERTIFIC 1 hereby certify that the rules and regularization have been complied with and is true and complete to the best of my	lations of that the in	he Oil Con formation (States w	X 0.	Da	te Appro	oved -		JUN 1	4 1991		
I hereby certify that the rules and regu	lations of that the in	he Oil Con formation (States w	X 0.	Da	te Appro					:	
I hereby certify that the rules and regu	lations of that the in	he Oil Con formation (States w	X 0.			ORIG	GINA	L SIGNE		:	
I hereby certify that the rules and regularision have been complied with and is true and complete to the best of my	lations of that the in	he Oil Con formation (and belief	given ac	on pove	Da		ORIG	GINA E WII	L SIGNE	D BY	 	
I hereby certify that the rules and regularization have been complied with and is true and complete to the best of my Signature Robert Setzler	lations of that the in	he Oil Con formation a and belief	rsu1	tant			ORIG	GINA E WII	L SIGNE			
I hereby certify that the rules and regularization have been complied with and is true and complete to the best of my	lations of that the in	he Oil Con formation p and belief	rsu1	tant 7-3223	Ву		ORIG	GINA E WII	L SIGNE	D BY		

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.