

OIL CONSERVATION DIVISION

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

Form C-104
Revised 1-1-89
RECEIVED
Instructions
at Bottom of Page

JAN 30 '90

O. C. D.
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

| | |
|--|--------------|
| Operator <u>Jack Phemons</u> | Well API No. |
| Address <u>8216 Chicago Lubbock Texas 79477</u> | |
| Person(s) for Filing (Check proper box) <input type="checkbox"/> New Well <input type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Completion <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/> <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> | |
| Name of operator give name Address of previous operator | |

DESCRIPTION OF WELL AND LEASE

| | | | | |
|----------------------------|-------------------------|---|--|-------------------------------|
| Well Name <u>Friess</u> | Well No. <u>4</u> | Pool Name, Including Formation <u>Grayburg Jackson</u> | Kind of Lease State, Federal or Fee <u>Federal</u> | Lease No. <u>LC 065015</u> |
| Unit Letter <u>F</u> | <u>1650</u> | Feet From The <u>North</u> Line and <u>1650</u> | Feet From The <u>West</u> Line | |
| Section <u>30</u> | Township <u>17 S</u> | Range <u>31 E</u> | NMPM <u>Kelly</u> | County |

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | | |
|--|--|--|--------------------|--------------------|---|-------|
| Name of Authorized Transporter of Oil <u>Pride Pipeline Company</u> | <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 2436 Abilene Texas 76604</u> | | | | |
| Name of Authorized Transporter of Casinghead Gas <u>None</u> | <input type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | | | | |
| Well produces oil or liquids, Location of tanks. | Unit <u>1 C</u> | Sec. <u>130</u> | Twp <u>17 S</u> | Rge <u>31 E</u> | Is gas actually connected? <u>NO</u> | When? |

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.I.D. | | |
| Measurements (DF, RKB, RT, GR, etc.) | Name of Producing Formation | | Top Oil/Gas Pay | | | Tubing Depth | | |
| Measurements | | | | | | Depth Casing Shoe | | |

| | | | |
|-----------|----------------------|-----------|---|
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT <u>Post ID-3</u> <u>2-23-90</u> <u>chgt LT: NRC</u> |
|-----------|----------------------|-----------|---|

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 | Date of Test | Producing Method (Flow, pump, gas lift, etc.) | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| Actual Prod. During Test | Oil - Bbls. | Water - Bbls. | Gas - MCF |

GAS WELL

| | | | |
|------------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test - MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Producing Method (pilot, back pr.) | Tubing Pressure (Shut in) | Casing Pressure (Shut in) | Choke Size |

I. 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.

Signature
Jack Phemons
Printed Name
Jack Phemons - Agent
Date
1-30-90
Telephone No.
206-794-0435

OIL CONSERVATION DIVISION

Date Approved FEB 16 1990

By ORIGINAL SIGNED BY
MIKE WILLIAMS
Title SUPERVISOR, DISTRICT II

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.
- All sections of this form must be filled out for allowable on new and recompleted wells.