Submit 5 Copies Appropriate District Office **DISTRICT I** P. O. Box 1980, Hobbs, NM 88240

DISTRICT III

DISTRICT II P. O. Drawer DD, Artesia, NM 88210

State of New Mexico

Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P. O. Box 2088

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

See Instructions at Bottom of Page

0.2007 1992

1000 Rio Brazos Rd., Aztec, NM 87410	T	O TRAN	SPOR	T OIL	AND N	ATURAL	GAS		O. C. D.	21	
Coperator PENNZOII PETEROI 3	PENNZOIL PETROLEUM COMPANY				<u>. </u>				Well API No.		
Address P. O. BOX 2967, HOUST								30 -	015-20435	·	
Reason (s) for Filling (check proper box)	 		-			Othe	(Please exp	lain)			
New Well	Vell Change in Trans			Turnel					dober 30, 1992		
If chance of operator give name and address of previous operator	Chevron U.S.	A. Inc., P. O). Box 1	150, Mid	land, TX 7	79702					
II. DESCRIPTION OF WELL AND LEASE											
Lease Name				Pool Name, Including Formation					Kind of Lease No. State, Federal or Fee		
Atoka San Andres Unit Location		153	Atoka	San Andı	res	 *		Fee			
Unit Letter O	_ :	0990	Feet Fr	om The	South	Line	and	2310	Feet From The	East Line	
Section 13 Township	18S		Range	****	26E		IPM,		Eddy	County	
III. DESIGNATION OF TRANS	SPORTER (NATUR			e address to	which approx	ved conv of this fo	or is to be sent)	
Name of Authorized Transporter of Oil	or Condensate				Address (Give address to which approved copy of this form is to be sent) P. O. Box 159, Artesia, NM 88210						
Navajo Refining Company Name of Authorized Transporter of Casinghead Gas X or Dry Gas					Address (Give address to which approved copy of this form is to be sent)					orm is to be sent)	
Phillips 66 Natural Gas	177.7	8	T	l Bas	70.000	4001 ctually conn	Penbrok, C	When?	9762		
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.		Yes	ected ?	When	Unknown		
If this production is commingled with that fr	om any other le	ease or pool,	give co	ommingli							
IV. COMPLETION DATA											
Designate Type of Completion	- (%)	Oil Well	Gas	Well	New Well	Workover	Deepen	Plugback	Same Res'v	Diff Res'v	
Date Spudded	Date Compl. Ready to Prod.				Total Depth P. B			P. B. T. D.	. B. T. D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Deg	Fubing Depth		
Peforations						Depth Casing Shoe					
	TUBING, CASING AND CE							1	SACKS CEMENT		
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET				SACKS CEMENT		
								<u> </u>			
V. TEST DATA AND REQUES											
OIL WELL (Test must be after re	Date of Test	volume of le	oad oil a		be equal to Producing			for this depth up, gas lift, et		hours)	
Length of Test	Tubing Pressure				Casing Pressure Chol			Choke Size	oke Size 1 - 15 - 93		
Actual Prod. During Test	Oil - Bbls.				Water - Bbls. Gas			Gas - MCF	s-MCF ling op		
GAS WELL	<u></u>										
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF Grav.			Gravity of	vity of Condensate		
Testing Method (pilot, back press.)	Tubing Pressure (Shut - in)				Casing Pressure (Shut - in) Chok			Choke Size	oke Size		
VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations 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 ApprovedJAN 1 1 1992						
Signature Of Signature					By ORIGINAL SIGNED BY MIKE WILLIAMS						
Signature Roy R. Johnson S. Acct.					Title		PERVISO		RICT II		
Printed Name 91 Date 91	75/682 To		6								

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.