

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

**RECEIVED**  
Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page  
  
OCT 18 '90

**REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

I. **Operator**  
THE EASTLAND OIL COMPANY ✓  
**Well APIN#**  
30-015-24925  
**Address**  
P. O. DRAWER 3488, MIDLAND, TX 79702  
**Reason(s) for Filing (Check proper box)** ☐ Other (Please explain)  
**New Well** ☐ **Change in Transporter of:**  
**Recompletion** ☐ **Oil** ☐ **Dry Gas** ☐  
**Change in Operator** ☒ **Casinghead Gas** ☐ **Condensate** ☐ **EFFECTIVE 09/01/90**  
**If change of operator give name and address of previous operator** FRED POOL DRILLING, INC., P. O. BOX 1393, ROSWELL, NM 88201

II. **DESCRIPTION OF WELL AND LEASE**  
**Lease Name** HUMBLE STATE- **Well No.** 1 **Pool Name, Including Formation** *W-1-B-G-SH* **Kind of Lease** *Reduction Rec* **Lease No.** B-11539  
**Location**  
**Unit Letter** G : 1650 Feet From The EAST Line and 1650 Feet From The NORTH Line  
**Section** 9 **Township** 18S **Range** 28E, NMPM, **EDDY** County

III. **DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**  
**Name of Authorized Transporter of Oil** ☒ or **Condensate** ☐  
PHILLIPS PETROLEUM **Address (Give address to which approved copy of this form is to be sent)**  
4001 PENBROOK, ODESSA, TX 79762  
**Name of Authorized Transporter of Casinghead Gas** ☒ or **Dry Gas** ☐  
PHILLIPS PETROLEUM **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** G **Sec.** 9 **Twp.** 18S **Rge.** 28E **Is gas actually connected?** YES **When?** 11/16/84

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. **COMPLETION DATA** *Wate PCD-2820278*  
**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** **Tubing Depth**  
**Perforations** **Depth Casing Shoe**

TUBING, CASING AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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** **Date of Test** **Producing Method (Flow, pump, gas lift, etc.)**  
**Length of Test** **Tubing Pressure** **Casing Pressure** **Choke Size** *posted ID-3 10-26-9*  
**Actual Prod. During Test** **Oil - Bbls.** **Water - Bbls.** **Gas- MCF** *chg OP*

**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.  
*Travis Reed*  
**Signature** TRAVIS REED **PRODUCTION SUPERINTENDENT**  
**Printed Name** 10/5/90 **Title** 915/683-6293  
**Date** **Telephone No.**

**OIL CONSERVATION DIVISION**  
**Date Approved** OCT 23 1990  
**By** ORIGINAL SIGNED BY MIKE WILLIAMS  
**Title** SUPERVISOR, DISTRICT II

**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.