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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

AUG 26 1991

O. C. D.
ARTESIA, OFFICE

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

| | |
|---|------------------------------|
| Operator Mewbourne Oil Company | Well API No. 30-015-25067 |
| Address P. O. Box 7698, Tyler, Texas 75711 | |
| Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: Recompletion <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> | |
| If change of operator give name and address of previous operator | |

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|---------------|---|--|---------------------|
| Lease Name STATE "CE" | Well No. 1 | Pool Name, including Formation CEDAR LAKE - STRAWN | Kind of Lease State, Federal or Box | Lease No. E-7811 |
| Location Unit Letter F : 1980 Feet From The North Line and 1880 Feet From The West Line Section 2 Township 18 South Range 30 East, NMPM, Eddy County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | | |
|--|--|-----------|-------------|-------------|-----------------------------------|-------------------|
| Name of Authorized Transporter of Oil or Condensate Pride Companies, L.P. | Address (Give address to which approved copy of this form is to be sent) P.O. Box 2436, Abilene, Texas 79604 | | | | | |
| Name of Authorized Transporter of Casinghead Gas or Dry Gas Conoco, Inc. | Address (Give address to which approved copy of this form is to be sent) 10 Desta Dr. Suite 627, Midland, Texas 79705 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit F | Sec. 2 | Twp. 18S | Rge. 30E | Is gas actually connected? Yes | When? 11/05/88 |

If this production is commingled with that from any other lease or pool, give commingling order number: No

IV. COMPLETION DATA

| | | | | | | | | |
|--|---------------------------------------|----------|----------------------------|----------|--------------------------------|-----------|------------|------------|
| Designate Type of Completion - (X) | Oil Well X | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v | Diff Res'v |
| Date Spudded 3/15/85 | Date Compl. Ready to Prod. 8/17/91 | | Total Depth 11,600' | | P.B.T.D. CIBP Set @ 11,180' | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3580.6' GR | Name of Producing Formation Strawn | | Top Oil/Gas Pay 10,488' | | Tubing Depth 10,409' | | | |
| Perforations 10,488-10,501', 13', 4 SPF, 52 Holes | | | | | Depth Casing Shoe -- | | | |
| TUBING, CASING AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 26" | 20" | | 30' | | 3 yds Redimix | | | |
| 17-1/2" | 13-3/8" | | 324' | | 350 Pnt ID-2 | | | |
| 11" | 8-5/8" | | 4,500' | | 2000 9-6-91 | | | |
| 7-7/8" | 5-1/2" | | 11,600' | | 925, rmp 4 BR | | | |

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 8/17/91 | Date of Test 8/18/91 | Producing Method (Flow, pump, gas lift, etc.) Flowing | |
| Length of Test 24 hours | Tubing Pressure 120# | Casing Pressure Packer | Choke Size 3/4" |
| Actual Prod. During Test | Oil - Bbls. 199 | Water - Bbls. 0 | Gas - MCF 501 |

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.

Signature
Gaylon Thompson, Engr. Opns. Secretary
Printed Name
August 22, 1991 (903) 561-2900
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 30 1991

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.

