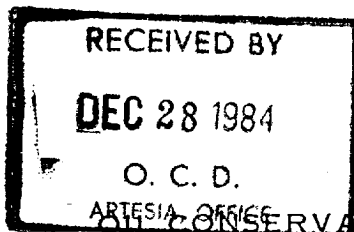


STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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ARTESIA OFFICE
OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator RALPH NIX ✓	
Address P.O. Box 440, Artesia, New Mexico 88210	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Fox	Well No. 2	Pool Name, including Formation Atoka/Glorieta, Yeso	Kind of Lease State, Federal or Fee Fee	Lease No. -
Location				
Unit Letter <u>E</u> ; <u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u>				
Line of Section <u>35</u> Township <u>18S</u> Range <u>26E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

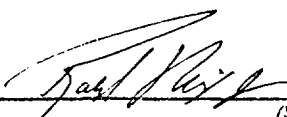
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Crude Oil Purchasing Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 175, Artesia, NM 88210			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) Phillips Bldg., Bartlesville, OK 74004			
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 35	Twp. 18S	Rge. 26E
Is gas actually connected?		When		
Yes		12/05/84		

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.


(Signature)

(Title)
December 13, 1984
(Date)

OIL CONSERVATION DIVISION

APPROVED DEC 31 1984, 19
BY Leslie A. Clements
TITLE Supervisor District II

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

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

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

Post ID-2
1-4-5
Comp + BK
X

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 11/10/84	Date Compl. Ready to Prod. 12/05/84		Total Depth 4151' KB			P.B.T.D. 4122' GL			
Elevations (DF, RKB, RT, GR, etc.) 3327' GR	Name of Producing Formation Glorieta/Yeso		Top Oil/Gas Pay 2796'			Tubing Depth 3892' GL			
Perforations 34, .50" holes from 2796' to 3882'						Depth Casing Shoe 4137' GL			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"		8 5/8"		918.5' GL		550 sx cir 150 sx			
7/8"		5 1/2"		4136' GL		675 sx cir trace			
		2 7/8"		3892' GL					

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 Tanks 12/11/84	Date of Test 12/25/84	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure 20#	Casing Pressure 20#	Choke Size Open
Actual Prod. During Test 464 bbls	Oil-Bbls. 80	Water-Bbls. 384	Gas-MCF 86

1975 GOR

GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size