

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

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MAY 16 1985

O. C. D.
ARTESIA, OFFICE

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

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator ELLIOTT OIL COMPANY	
Address Box 1355, Roswell, New Mexico 88201	
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	CASINGHEAD GAS MUST NOT BE FLARED AFTER <u>7-16-85</u> UNLESS AN EXCEPTION FROM THE B. L. M. IS OBTAINED

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE <u>R-7958 6/12/85</u>				
Lease Name E. M. Elliott	Well No. #4	Pool Name, including Formation South Lee <u>SP-2, S-5A</u>	Kind of Lease State, Federal or Fee Fed.	Lease No. NM27279
Location <u>TURKEY TRACK</u>				
Unit Letter L	: 1980	Feet From The South	Line and 660	Feet From The West
Line of Section 31	Township 18S	Range 30E	NMPM, Eddy	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

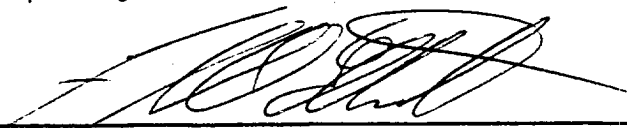
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refining Company	Address (Give address to which approved copy of this form is to be sent) Box 159, Artesia, New Mexico 88210	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> negotiating market	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 31
	Twp. 18S	Rge. 30E
Is gas actually connected?	No	When Unknown

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.


Frank O. Elliott (Signature)
Owner
(Title)
5/15/85
(Date)

OIL CONSERVATION DIVISION

APPROVED MAY 16 1985, 19

BY Original Signed By
Mike Williams
TITLE Oil & Gas Inspector

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.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.				
4/23/85	5/10/85		3025'		2955'				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth				
3424 KB	Queen-Grayberg		2503		2870'				
Perforations		See Below 2503-2892				Depth Casing Shoe			
						3021'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
12 1/4"	8 5/8"		356'		350 sx				
7 7/8"	5 1/2"		3021'		1500 sx				
	2 7/8		2870						

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
5/13/85	5/14/85	Pump	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24	0	0	2"
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
280 bbls.	186	94 (Frac water)	est. 186 MCF

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

Perforations:

2892		2600	14 Holes - Penrose
2890		2598	
2888	24 Holes - Grayberg	2596	Acid 1000 Gal 10% 1st Stage
2886		2594	1000 Gal 10% 2nd Stage
2868	Acid 1500 Gal. 10% HCL	2591	30,000 Gal
2866		2589	2nd Stage
2864	40,000 Gal. 2% KCL 30# Gel System	2587	60,000# Sd.
2862	1st Stage		
2860	80,000# Sd.		
2858		2511	
2819		2509	
2818		2507	10 Holes - Mid-Queen
2815		2505	
2814		2503	