NO. OF COPIES RECEIVED DISTRIBUTION Form C-104 NEW MEXICO OIL CONSERVATION COMMISSION Supersedes Old C-104 and C-110 Effective 1-1-65 / REQUEST FOR ALLOWABLE SANTA FE FILE AND UTHOREZATIONETO TRANSPORT OIL AND NATURAL GAS U.S.G.S. LAND OFFICE QQT 3 0 1985 TRANSPORTER GA5 OPERATOR O. C. D. PRORATION OFFICE H & S OIL COMPANY V SUITE 303, FIRST NATIONAL BANK BLDG. ARTESIA, NM Other (Please explain) Reason(s) for filing (Check proper box) <u>X</u> Change in Transporter of: New Well Dry Gas Recompletion Condensate Casinahead Gas Change in Ownership If change of ownership give name and address of previous owner ____ II. DESCRIPTION OF WELL AND LEASE | Well No. | Pool Name, Including Formation Lease No. Kind of Lease State, Federal or Fee FEE Atoka, Glorieta, Yeso 6 SCRIPPS Location West ; 2145 Feet From The South Line and 1980 Feet From The Unit Letter County Eddy Range 26E , NMPM, Township 18S Line of Section 25 III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil X P.O. Drawer 159 Artesia, NM 88210 Navajo Refining Company Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas 🛣 or Dry Gas 74004 P.O. Box 5050, Bartlesville OK Phillips Petroleum Company Is gas actually connected? Twp. P.ge. Unit If well produces oil or liquids, give location of tanks. 9/14/85 K 25 18 , 26 Yes If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Same Res'v. Diff. Res'v Plug Back New Well Workover OII Well Gas Well Designate Type of Completion - (X) X Х Total Depth Date Compl. Ready to Prod. Date Spudded 3678 8-22-85 9-14-85 Tubing Depth Top Oil/Gas Pay Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) 3580 2916 Yeso 3278 GR Depth Casing Shoe Perforations 2916-3377 TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE 390sks/w 200sks 2%CACL 939 8 5/8" <u> 11 1/4</u> 250sks DLWIII 300sks 5 1/2" 3682 8 5/8 Tailend Class C 3# D-44 3580 23/8 (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) V. TEST DATA AND REQUEST FOR ALLOWABLE 11- 8- 85 OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date of Test Date First New Oil Run To Tanks BK Pumping 10/25 10/13/85 Choke Size Casing Pressure Tubing Pressure Length of Test 24 Gge - MCF Water - Bbls. Oil - Bbls. Actual Prod. During Test tstm 178 28 **GAS WELL** Gravity of Condensate Bbls. Condensate/MMCF Length of Test Actual Prod. Test-MCF/D Choke Size Casing Pressure (Shut-in) Tubing Pressure (shut-in) Testing Method (pitot, back pr.) OIL CONSERVATION COMMISSION VI. CERTIFICATE OF COMPLIANCE OCT 31 1985 APPROVED_ I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Original Signed By Les A. Clements TITLE _ 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. (Signature) All sections of this form must be filled out completely for allowable on new and recompleted wells.

Dartner

10-29-85

(Title)

(Date)

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.