STATE OF NEW MEXICO
NERGY AND MINERALS DEPARTMENT

Form C-104
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# OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RECEIVED BY
JAN 17 1986
O. C. D.
ARTESIA, OFFICE

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

Operator
RALPH NIX

Address
P. O. Box 440, Artesia, New Mexico 88210

Reason(s) for filing (Check proper box)
- [X] New Well
- [ ] Recompletion
- [ ] Change in Ownership

Change in Transporter of:
- [ ] Oil
- [ ] Dry Gas
- [ ] Casinghead Gas
- [ ] Condensate

Other (Please explain)
CASINGHEAD GAS MUST NOT BE FLARED AFTER 3-24-86 UNLESS AN EXCEPTION TO RULE 306 IS OBTAINED ✓

If change of ownership give name and address of previous owner

## I. DESCRIPTION OF WELL AND LEASE

| Lease Name | Well No. | Pool Name, Including Formation | Kind of Lease (State, Federal or Fee) | Lease No. |
|---|---|---|---|---|
| Merri Battery #2 | #3 | Atoka, Glorieta/Yeso | Fee | --- |

Location
Unit Letter O : 2270 Feet From The East Line and 960 Feet From The South

Post ID-2
1-24-86
Camp Gouldy

Line of Section 34 Township 18S Range 26E , NMPM, Eddy

## III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil [X] or Condensate [ ]
Navajo Crude Oil Purchasing Co.

Address (Give address to which approved copy of this form is to be sent)
P. O. Box 175, Artesia, New Mexico 88210

Name of Authorized Transporter of Casinghead Gas [X] or Dry Gas [ ]
Phillips Petroleum Company

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 | Sec. | Twp. | Rge. | Is gas actually connected? | When |
|---|---|---|---|---|---|---|
| | J | 34 | 18S | 26E | no | |

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.

Fred Nix
(Signature)

(Title)

January 16, 1986
(Date)

## OIL CONSERVATION DIVISION

APPROVED JAN 22 1986, 19

BY Original Signed By
Les 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.

## 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. |
|---|---|---|---|
| 11-12-85 | 1-12-86 | 4066' KB | 4002' |
| **Elevations** *(DF, RKB, RT, GR, etc.)* | **Name of Producing Formation** | **Top Oil/Gas Pay** | **Tubing Depth** |
| 3349' GR | Glorieta/Yeso | 2845' | 3884' |
| **Perforations** 18, .41" holes, 1 shot per 2', 3844-3878'; 18, .41" holes 3480-3570'; 30, .41" holes, 2845-3174' | | | **Depth Casing Shoe** 4051' |

TUBING, CASING, AND CEMENTING RECORD

| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
|---|---|---|---|
| 12 1/4" | 8 5/8" 24# | 1008' | 550 sx circ |
| 7 7/8" | 5 1/2" 15.5# | 4051' | 700 sx circ |
| | 2 7/8" 6.5# | 3919' | |
| | | | |

## 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)*

OIL WELL

| Date First New Oil Run To Tanks | Date of Test | Producing Method *(Flow, pump, gas lift, etc.)* | |
|---|---|---|---|
| 1-12-86 | 1-15-86 | pumping | |
| **Length of Test** | **Tubing Pressure** | **Casing Pressure** | **Choke Size** |
| 24 hours | 20# | NT | ---- |
| **Actual Prod. During Test** | **Oil - Bbls.** | **Water - Bbls.** | **Gas - MCF** |
| 450 bbls. | 35 | 415 | 42 |

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** |
| | | | |