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C. C. D.  
ARTESIA, OFFICEForm C-104  
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Page 1STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		✓
FILE		✓
U.S.G.S.		✓
LAND OFFICE		
TRANSPORTER	OIL	✓
	GAS	✓
OPERATOR		✓
PRORATION OFFICE		

**I. Operator**  
 MYCO INDUSTRIES, INC. ✓  
**Address**  
 207 South Fourth Street, Artesia, New Mexico 88210  
**Reason(s) for filing (Check proper box)**  
☒ New Well  
☐ Recompletion  
☐ Change in Ownership  
**Change in Transporter of:**  
☐ Oil  
☐ Casinghead Gas  
☐ Dry Gas  
☐ Condensate  
**Other (Please explain)**

If change of ownership give name and address of previous owner \_\_\_\_\_  
**\*NOTE: THIS IS THE SECOND WELL ON THE 40 - ACRE PRORATION UNIT (EVEREST FEE #2 IS FIRST WELL).**

## II. DESCRIPTION OF WELL AND LEASE

Lease Name EVEREST FEE	Well No. 3	Pool Name, including Formation ATOKA SAN ANDRES	Kind of Lease State, Federal or Fee FEE	Lease No. ---
Location Unit Letter <u>L</u> : <u>1650</u> Feet From The <u>SOUTH</u> Line and <u>950</u> Feet From The <u>WEST</u> Line of Section <u>14</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 REFINING CO.	Address (Give address to which approved copy of this form is to be sent) P.O. DRAWER 159 ARTESIA, NEW MEXICO 88210	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> PHILLIPS "66" NATURAL GAS CO.	Address (Give address to which approved copy of this form is to be sent) 4001 PENBROOK ODESSA, TEXAS	
If well produces oil or liquids, give location of tanks. Unit <u>L</u> Sec. <u>14</u> Twp. <u>18S</u> Rge. <u>26E</u>	Is gas actually connected? YES	When 2/22/88 <i>Post ID-2 3-25-88 comp 4 BIK</i>

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.

*William Williams, PECS*  
 (Signature)  
 ENGINEER  
 3/3/88  
 (Date)

## OIL CONSERVATION DIVISION

APPROVED MAR 21 1988, 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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 1-9-88	Date Compl. Ready to Prod. 2-22-88		Total Depth 1750'		P.B.T.D. 1734'				
Elevations (DF, RKB, RT, CR, etc.) 3818.8' GL	Name of Producing Formation SAN ANDRES		Top Oil/Gas Pay 1683'		Tubing Depth 1700' 1718'				
Perforations 1683', 1684', 1685', 1686', 1687', 1688', 1689', 1690' (8 - HOLES)						Depth Casing Shoe 1750'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"		8 5/8" - 24#		897'		560 - sxs, (circ. 200 - sxs)			
7 7/8"		5 1/2" - 15.5#		1749'		450 - sxs, (circ. 100 - sxs)			
2 3/8"		EUE - 8RD		1718'					

#### 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 2-22-88	Date of Test 3-3-88	Producing Method (Flow, pump, gas lift, etc.) PUMPING	
Length of Test 24 - HRS	Tubing Pressure 30#	Casing Pressure 30#	Choke Size 1/8"
Actual Prod. During Test 42 - BBLS	Oil - Bbls. 12 - BO	Water - Bbls. 30 - BW	Gas - MCF 15 - 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