

Submit 5 Copies  
Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico  
Energy, Minerals and Natural Resources Department

RECEIVED

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

NOV 12 '90

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator Socorro Petroleum Company		Well API No. 30-015-26391
Address P.O. Box 38, Loco Hills, NM 88255		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Other (Please explain) <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Transporter of: Change in Operator <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Turner "B"	Well No. 84	Pool Name, Including Formation Grayburg Jackson	Kind of Lease State, Federal	Lease No. LO-029395-B
Location Unit Letter <u>9B</u> : <u>1305</u> Feet From The <u>North</u> Line and <u>2525</u> Feet From The <u>East</u> Line Section <u>29</u> Township <u>17 S</u> Range <u>31 E</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"/> Texas New Mexico Pipeline	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2528, Hobbs, NM 88240					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Continental Oil Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 460, Hobbs, NM 88240					
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 29	Twp. 17S	Rge. 31E	Is gas actually connected? Yes	When? 10/21/90

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well XX	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 9/26/90	Date Compl. Ready to Prod. 10/21/90		Total Depth 3550'		P.B.T.D. 3496'			
Elevations (DF, RKB, RT, GR, etc.) 3726' GR 3737' KB	Name of Producing Formation Grayburg San Andres		Top Oil/Gas Pay 3120'		Tubing Depth 3402'			
Perforations 3120-22 3 holes	3157-59 3 holes	3300-67 18 holes	3467-72 6 holes		Depth Casing Shoe 3550'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		626'		350 sx. C1. C + 155 sx.			
7-7/8"	5-1/2"		3550'		950 sx. C1 C + 700 sx.			
	2-7/8"		3402'		Post F.D.-2 12-5-90			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (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 Tank 10/21/90	Date of Test 10/21/90	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24hrs.	Tubing Pressure 250#	Casing Pressure 200#	Choke Size 10/64"
Actual Prod. During Test	Oil - Bbls. 220	Water - Bbls. 222	Gas - MCF 222

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

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

Signature Robert Setzler Consultant  
Printed Name Robert Setzler Title  
Date 11/12/90 Telephone No. 677-3223

OIL CONSERVATION DIVISION

Date Approved NOV 30 1990

By MIKE WILLIAMS  
Title SUPERVISOR, DISTRICT II

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells