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

State of New Mexico
Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

APR 25 1991

O. C. D.
ARTESIA, OFFICE

Operator LaRue & Muncy	Well API No. 3001526598
Address P.O. Box 196 Artesia NM 88210	
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> <input type="checkbox"/> Other (Please explain) CASINGHEAD GAS MUST NOT BE Recompletion <input type="checkbox"/> <input type="checkbox"/> Change in Transporter of: FLARED AFTER 6/26/91 Change in Operator <input type="checkbox"/> <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> UNLESS AN EXCEPTION FROM THE B. L. M. IS OBTAINED	
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Gates Federal	Well No. 6	Pool Name, Including Formation Shugart 7R-Qn-Gb	Kind of Lease State, Federal or Fee	Lease No. NM-27277
Location Unit Letter P : 330 Feet From The South Line and 330 Feet From The East Line Section 34 Township 18 S Range 30 E , NMPM , Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Navajo <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) N. Freeman Artesia NM 88210					
Name of Authorized Transporter of Casinghead Gas Phillips <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook Odessa Tx 79762					
If well produces oil or liquids, give location of tanks.	Unit P	Sec. 34	Twp. 18S	Rge. 30E	Is gas actually connected? No	When ?

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v <input type="checkbox"/>	Diff Res'v <input type="checkbox"/>
Date Spudded 2/21/91	Date Compl. Ready to Prod. 4/4/91		Total Depth 3458		P.B.T.D. 3421			
Elevations (DF, RKB, RT, GR, etc.) 3423.4	Name of Producing Formation Queen		Top Oil/Gas Pay 2888		Tubing Depth 2850			
Perforations 2888-3017 20 .40 cal					Depth Casing Shoe 3458			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 12 1/4	CASING & TUBING SIZE 8 5/8		DEPTH SET 573		SACKS CEMENT 325 circulated			
7 7/8	5 1/2		3458		950 circulated			
					Part ID-2			
					5-3-91			

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 4/6/91	Date of Test 4/19/91	Producing Method (Flow, pump, gas lift, etc.) flow	
Length of Test 24	Tubing Pressure 100	Casing Pressure 250	Choke Size 1"
Actual Prod. During Test 62	Oil - Bbls. 60	Water - Bbls. 2	Gas- MCF 200(est)

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 **Randall L. Harris** Agent
Printed Name **4/23/91** Title **505/748-2205**
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved **APR 23 1991**

By **ORIGINAL SIGNED 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.