

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator Avon Energy Corp.		Well API No. 30-015-26656
Address PO Box 37, Loco Hills, NM 88255		
Reason(s) for Filing (Check proper box)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	<input checked="" type="checkbox"/> Other (Please explain) <del>request testing allowable of 600 bbl</del> <del>for month of April</del>
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Operator <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 Max Friess <i>MA</i>	Well No. #5	Pool Name, including Formation Grayburg Jackson	Kind of Lease State, Federal or Fee	Lease No. LC-065014
Location				
Unit Letter A	: 1270	Feet From The North	Line and 100'	Feet From The East
Section 30	Township 17S	Range 31E	NMIM,	Eddy
				County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Navajo Refining Co. <input checked="" type="checkbox"/>	or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) PO Drawer 159, Artesia, NM 88210	
Name of Authorized Transporter of Casinghead Gas Continental Oil Company	or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) PO Box 460, Hobbs, NM 88240	
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 30	Twp. 17S
		Rge. 31E	
Is gas actually connected?		When?	
Yes		5-1-91	
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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 3-12-91	Date Compl. Ready to Prod. 3-30-91	Total Depth 3805	P.B.T.D. 3762					
Elevations (DF, RKB, RT, GR, etc.) 3613 GR	Name of Producing Formation Grayburg-San Andres	Top Oil/Gas Pay 3036	Tubing Depth 3582					
Perforations 3036-3251	3347-3540	Depth Casing Shoe						
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 17 1/2	CASING & TUBING SIZE 12 3/4	DEPTH SET 325	SACKS CEMENT 500sx. Cl C (circ)					
11	8 5/8	1391	500sx LW+200sx. Cl C Circ.					
7 7/8	5 1/2	3810	250sx LW+850sx. Cl C Circ.					

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 3-30-91	Date of Test 4-22-91	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24	Tubing Pressure	Casing Pressure 50	Choke Size Post ID-2 8-23-91 comp & RK
Actual Prod. During Test	Oil - Bbls. 292	Water - Bbls. 61	Gas - MCF 200

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	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 *[Signature]* consultant

Printed Name Title

Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved AUG 13 1991

By ORIGINAL SIGNED BY  
MIKE WILLIAMS  
SUPERVISOR, DISTRICT II

Title

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 multiple completed wells.