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Appropriate District Office
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DISTRICT II
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DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

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

RECEIVED

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

JUN - 1 1992

O. C. D.
OFFICE

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Socorro Petroleum Company	Well API No. 3001526882
Address PO Box 37, Loco Hills, NM 88255	
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> <input type="checkbox"/> Other (Please explain) Recompletion <input type="checkbox"/> <input type="checkbox"/> Change in Transporter of: Change in Operator <input checked="" type="checkbox"/> <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in operator name effective Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> May 1, 1992	
If change of operator give name and address of previous operator Avon Energy Corporation, P.O. Box 37, Loco Hills, NM 88255	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Max Friess "MA"	Well No. 6	Pool Name, including Formation Grayburg-Jackson	Kind of Lease State, Federal or Fee	Lease No. LC-065014
Location Unit Letter B : 1270 Feet From The N Line and 1460 Feet From The E Line Section 30 Township 17S Range 31E, NMPM, Eddy 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 Co.	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 G Sec. 30 Twp. 17S Rge. 31E Is gas actually connected? 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 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 5/15/92	Date Compl. Ready to Prod. 5/21/92	Total Depth 3592	P.B.T.D. 3865
Elevations (DF, RKB, RT, GR, etc.) 3603 KB	Name of Producing Formation Grayburg-San Andres	Top Oil/Gas Pay 3089'-3519'	Tubing Depth 3568'
Performances 3089'94', 3185-3206', 3320-24', 3516-19'			Depth Casing Shoe 3937'
TUBING, CASING AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-3/8"	404'	375 SX Post ID-2
12-1/4"	8-5/8"	1443'	650 SX 6-5-92
7-7/8"	5-1/2"	3937'	1100 SX chg op

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 5/21/92	Date of Test 6/1/92	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 298	Water - Bbls. 448	Gas - MCF 16.4

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 Title
Date 505/677-3223 Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUN 3 1992

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 multiply completed wells.