			LUNSERVATION	MISSION	Form C -104	
	SANTA FE	REQUEST FOR ALLOWABLE Supersedes Old C-104 and C- Effective 1-1-65				
	LAND OFFICE	AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
1	TRANSPORTER OIL RECEIVED BY					
	OPERATOR		RECEIVED DI			
1.	PRORATION OFFICE	N OFFICE MAY 26 1987				
	MEWBOURNE OIL COMPANY					<u>`</u>
	Address P. O. BOX 76	RILISIA, OFFICE				
	Reason(s) for Isling (Check proper box	«)	Other (Pleas	e explainj	· ·	
	New Well Recompletion Change in Ownership	Change in Transporter of: Oil Dry G Casinghead Gas Conde	Gas X ensale		• *	
1	f change of ownership give name and address of previous owner					~
11	DESCRIPTION OF WELL AND	LEASE				<b></b>
Į	Federal "C" Com	Well No. Pool Name, including i	(Morrow)	Kind of Lease State, Federal	or Foo Federal	L-98-4 3948 NM-06348
	Unit Letter <u>H</u> ; <u>198</u>	80 Feet From The North Li	ine and <u>660</u>	Feet From T	ne <u>East</u>	·
	Line of Section 7 To	wnship 20S Range	25E , NMPI	л.	Eddy	County
<b>II.</b> 1	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G	AS			a ka canti
[	Nome of Authorized Transporter of OII or Condensate XX Phillips Petroleum Company		Address (Give address to which approved copy of this form is to be sent) 4001 Pembrook, Odessa, Texas 79761			
ŀ	Nome of Authorized Transporter of Casinghead Gas or Dry Gas		Address (Give address to which approved copy of this form is to be sent) P.O.Box 26400, Albuquerque, N.M. 87125			
╞	Sunterra Gas Gathering Company 11 well produces oil or liquids, Unit Sec. Twp. P.ge. 12 Unit Sec. Twp. P.ge.		Is gas actually connected? When			
l	give location of tanks.	<u>H 7 208 25E</u>		h	6/12/75	6
1 V. (	f this production is commingled wi COMPLETION DATA	ith that from any other lease or pool,		Deepen	Plug Back Same Res	I'v. ' Diff. Bes'v
ſ	Designate Type of Completio	on - (X) Oil Well Gas Well	New Well Workover	i i		
ŀ	Date Spudard	Date Compl. Ready to Prod.	Total Depth		P.B.T.D.	
-	11/07/74 Elevations (DF, RKB, RT, GR, etc.)	12/24/74 Name of Producing Formation	9540 ' Top Oil/Gas Pay		Tubing Depth	
	3536' KB, 3525' GR	Morrow	9373		9276 Depth Casing Shoe	<u>}'</u>
	Perforations 9373' - 9447'					
F	HOLESIZE	TUBING, CASING, AN	D CEMENTING RECO		SACKS CEN	IENT
+	17-1/2"	18-3/8''	81	.0'	275	
Ľ	11"	8-5/8"	1,25		450 500	
-	7-7/8"	4-1/2	9,04	.0	000	
L V. 1	TEST DATA AND REQUEST FOR ALLOWABLE (Test must be ofter recovery of total volume of load oil and must be equal to or exceed top allow able for the depth or be for full 24 hours)					
(	DIL, WELL Date First New Oil Run To Tanks	able for this d	Producing Method (Flor		(, etc.) 5-	29-87
			Casing Pressure	~	Choke Size	FT: GNM
	Length of Test	Tubing Pressure			Gas-MCF	
ſ	Actual Prod. During Test	Oll Bbls.	Water - Bbls.			
I_						
	JAS WELL Actual Frod. ToolythCF/D	Length of Test	Bbls. Condensate/MMC	F	Gravity of Condensole	
	Testing Kethod (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut	-in)	Choke Size	<u> </u>
L					TION COMMISSION	
	ERTIFICATE OF COMPLIAN			MAY 2	9.1987	19
-	hereby certify that the rules and regulations of the Oil Conservation ommission have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.		BYOriginal Signed By Mike Williams			
			TITLEOil & Gas Inspector			
_	Supon Thompson		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			
<i>[</i> .	(Signature) Engineering Operations Secretary		tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for allow-			
	(Tule) May 20, 1987		able on new and recompleted wells.			
1	MAY 20, 1987 (Date)		Fill out only Sections 1, in the other auch change of condition. well name or number, or transporter, or other auch change of condition. Separate Forms C-104 must be filed for each pool in multiply completed wells.			
			•			

•

•