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LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

RECEIVED

MAR 22 1976

I.

Operator R. C. Bennett & J. C. Ryan		O. C. C. ARTESIA OFFICE
Address P. O. Box 264, Midland, Texas 79701		
Reason(s) for filing (Check proper box)		Other (Please explain)
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input checked="" type="checkbox"/>	
Recompletion <input type="checkbox"/>		
Change in Ownership <input type="checkbox"/>		

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Exxon-State	Well No. 2	Pool Name, including Formation Upper Penn (Cisco)	Kind of Lease State, Federal or Fee State	Lease No. E-5073
Location Unit Letter <u>F</u> ; <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>West</u> Line of Section <u>25</u> Township <u>19S</u> Range <u>28E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Navajo Crude Oil Purchasing Company	Address (Give address to which approved copy of this form is to be sent) Box 174, Artesia, New Mexico 88210					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> El Paso Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) Box 1492, El Paso, Texas 79978					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 25	Twp. 19S	Rge. 28E	Is gas actually connected? Yes	When 3-19-76

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest'y.	Diff. Rest'y.
		X	X					
Date Spudded 12/16/75	Date Compl. Ready to Prod. 2/1/76	Total Depth 11,375	P.B.T.D. 11,340					
Elevations (DF, RKB, RT, GR, etc.) 3362.8 KB	Name of Producing Formation Upper Penn	Top Oil/Gas Pay 11,142 9712	Tubing Depth 11,217.16					
Perforations 9712-9791, 1/2", 23 shots	Depth Casing Shoe 11,375							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 17 1/8"	CASING & TUBING SIZE 13 3/8"	DEPTH SET 350'	SACKS CEMENT 445 sx Class C					
11 "	8 5/8"	2500	700 sx Lite, 300 sx Class C					
7 7/8 "	5 1/2"	10746.01'	600 sx Class "H"					
		11370 (629.99)						

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 Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test-MCF/D 1,030	Length of Test 4 hr.	Bbls. Condensate/MMCF 33bbls	Gravity of Condensate 53.0
Testing Method (pitot, back pr.) back pressure	Tubing Pressure (Shut-in) 2842	Casing Pressure (Shut-in) NA	Choke Size 1"

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

[Signature]
(Signature)
Partner
(Title)
March 22, 1976
(Date)

OIL CONSERVATION COMMISSION
MAR 25 1976

APPROVED _____, 19____
BY W. A. Grasset
TITLE SUPERVISOR, DISTRICT II

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 tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.