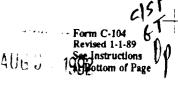
Submit 5 Copies
Appropriate District Office
DISTRICT I P.O. Box 1980, Hobbs, NM 88240

## State of New Mexico Energy, Minerals and Natural Resources Department

## **OIL CONSERVATION DIVISION**

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



Q. C. D.

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

000 Rio Brazos Rd., Aztec, NM 87410	REO	UESTE	OR A	ALLOWA	BLE AND	AUTHOR	IZATION				
ſ <b>.</b>	11120				L AND NA				•		
perator						Well API No.					
Mewbourne Oil Con	3			30-015	30-015-22478						
Address P. O. Box 7698, 7	Cvler.	Texa	ıs 7	5711							
Reason(s) for Filing (Check proper box)	1 ,				Ou	ner (Please exp	lain)				
New Well		Change in	_								
Recompletion	Oil		Dry (								
Change in Operator  f change of operator give name	Casinghe	ad Gas	Cona	ensate							
nd address of previous operator	· · · · · · · · · · · · · · · · · · ·										
I. DESCRIPTION OF WELL	AND LE	EASE		<b>D</b>							
ase Name  New Mexico "CU" State   Well No.   Pool Name, Includi  Well No.   Pool Name, Includi					- 1 -			of Lease	of Lease No. E-5073		
Location	cate		MT	nchest	er opp	er (Fei	111)		E-	3073	
Unit Letter N	•	660	Feet	From The S	outh Lin	19	80 F	eet From The	West	T :	
						E 200	г	ect riom ine		Line	
Section 24 Townshi	р	198	Rang	<sub>e</sub> 28	E , N	MPM,		Eddy		County	
II. DESIGNATION OF TRAN	SPORTI	ER OF O	TI. AT	VD NATI	RAL GAS						
Name of Authorized Transporter of Oil		or Conde		NE INITIO		ve address 10 w	hich approved	d copy of this f	form is to be see	ਧ)	
Scurlock Permian		oratio	n		P.O.B	ox 1183	, Hous	ton, To	exas 77	027	
Name of Authorized Transporter of Casing			or Dr	y Gas					form is to be ser	u)	
f well produces oil or liquids,	PM Gas Corporation  produces oil or liquids,   Unit   Sec.   Twp.   Rge.					Bartlesville, Okl					
ive location of tanks.	C   36   19S  28E				Is gas actually connected? When			12/23/77			
this production is commingled with that	from any ot	her lease or	pool, g	ive comming	ling order num	ber:					
V. COMPLETION DATA		lau ur u	,		1						
Designate Type of Completion	- (X)	Oil Well	1 <u>j</u>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Com	ipl. Ready to	o Prod.		Total Depth	1	J	P.B.T.D.	I	I	
Elevations (DF, RKB, RT, GR, etc.)	tions (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth		
erforations						<u> </u>			Depth Casing Shoe		
								Depth Cashi	ig Shoe		
	·	TUBING,	CAS	ING AND	CEMENTI	NG RECOR	SD.				
HOLE SIZE	OLE SIZE CASING & TUBING SIZE				DEPTH SET				SACKS CEMENT		
								-			
								<del>                                     </del>			
. TEST DATA AND REQUES											
OIL WELL (Test must be after red)  Date First New Oil Run To Tank	Date of Te		of load	oil and must		exceed top all ethod (Flow, p			for full 24 hour	5.)	
The river on river to rain	Date of 16	53 <b>4</b>			r todateing ivi	eulou ( <i>Flow</i> , p	ump, gas tyt, t	eic.)			
ength of Test	Tubing Pressure				Casing Pressure			Choke Size			
- 1 D - 1 D											
al Prod. During Test Oil - Bbls.				Water - Bbls.			Gas- MCF				
GAS WELL	L	<del>-</del>			1	<del>-</del>		<u> </u>		<del>- ·</del>	
Actual Prod. Test - MCF/D	Length of	Test			Bbls. Conden	sate/MMCF		Gravity of C	Ondensate		
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size	Choke Size		
W ODDR A MOT STEE					ļ						
I. OPERATOR CERTIFIC				NCE	(		JSERV	ΔΤΙΩΝΙ Ι	טואופוט	NI.	
I hereby certify that the rules and regulations of the Oil Conservation  Division have been complied with and that the information given above						OIL CONSERVATION DIVISION					
is true and complete to the best of my k	nowledge a	nd belief.			Date	Approve	d	AUG 2	8 1992		
Mar Los In	20 -		<b>-</b> /		Date	Approve	J				
Signature Signature	am	Jus			Ву_		OR10	SINAL SIG	NED BY		
Signature Gay Lon Thompson, Engr. Oprns. Sec.					MIKE WILLIAMS						
Printed Name Title					Title SUPERVISOR, DISTRICT !!						
8/26/92 (9	903) 5	61-29	00	N/-			<b>.</b>			. Pug	

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.