| NO. OF COPIES RECEIVED DISTRIBUTION SANTA FE | | CONSERVATION COMMISSION | Form C-104 Supersedes Old C-104 and C-11 |
|--|--|---|--|
| FILE U.S.G.S. | | AND | Effective IRECEIVED |
| LAND OFFICE | AUTHORIZATION TO TR | ANSPORT OIL AND NATURAL GAS | |
| TRANSPORTER OIL | 1 | | JAN 28 1982 |
| OPERATOR I. PRORATION OFFICE Operator | | | O. C. D. Artesia, other |
| | Production Company / | | |
| Address P. O. | Box 68, Hobbs, NM 88240 | | |
| Reason(s) for filing (Check pro | oper box) | Other (Please explain) | |
| Recompletion | Change in Transporter of: Oli Dry G | Gas X | |
| Change in Ownership | Casinghead Gas Conde | ensate | |
| If change of ownership give and address of previous own | | | |
| 11. DESCRIPTION OF WELL | | | |
| Lease Name Greenwoo Pregrayburg Unit Fo | | Formation Kind of Lease rt Penn Monitor State, Federal or | Lease No. |
| Location | Com | | |
| Unit Letteri | 1980 Feet From The South La | ine and660 Feet From The | West |
| Line of Section 27 | Township 18-S Range 31 | -E , NMPM, Edd | Y County |
| I. DESIGNATION OF TRAN | SPORTER OF OIL AND NATURAL G | 45 | |
| Name of Authorized Transporte | or of Oil or Condensate | Address (Give address to which approved a | |
| | r of Casinghead Gas or Dry Gas | P. 0. Box 1183, Houston Address (Give address to which approved (1) P. 0. Box 2197, Hous | , TX copy of this form is to be sent) |
| (1) Conoco | (2) Southern Union Sattering 6 | (1) P. U. BOX 2197, Hous (2) P. O. BOX 1358, LOV | ston, IX ington. NM |
| If well produces oil or liquids, give location of tanks. | | | |
| If this production is comming V. COMPLETION DATA | gled with that from any other lease or pool, | | |
| Designate Type of Cor | npletion - (X) | New Well Workover Deepen Pi | ug Back Same Res'v. Diff. Res'v. |
| Date Spudded | Date Compl. Ready to Prod. | Total Depth P. | B.T.D. |
| Elevations (DF, RKB, RT, GR, | etc.; Name of Producing Formation | Top Oll/Gas Pay Tu | ibing Depth |
| Perforations | ł | De | epth Casing Shoe |
| 11594'-117 | | ID CEMENTING RECORD | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
| | | | |
| | | | · · · · · · · · · · · · · · · · · · · |
| V. TEST DATA AND REQU | EST FOR ALLOWABLE (Test must be | after recovery of sotal volume of load oil and s | must be equal to or exceed top allow |
| OIL WELL Date First New Oil Run To Tai | · | Producing Method (Flow, pump, gas lift, ct | c.) <u>A</u> (^{c,1} * |
| Length of Test | Tubing Pressure | Casing Pressure C | icke Size |
| Lengin of Test | Tabling Fissbarg | | Now Know SZ |
| Actual Pred, During Test | Oll-Bris. | Water - Bbls. Go | is-MCF |
| | | ······································ | |
| GAS WELL Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF Gr | avity of Condensate |
| Testing Method (pitot, back pr. | J Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) Ch | noke Size |
| | | | |
| VI. CERTIFICATE OF COMP | LIANCE | OIL CONSERVATIO | |
| 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. | | APPROVED JAN 2 9 1982 . 19 | |
| | | BY_ W. C. Gresset | |
| | A | TITLE TOPENISCH, MALL | n na seanna ann an Stàiteanna ann an St Tha ann an Stàiteanna a |
| M. b. Inana | | This form is to be filed in comp | |
| (Signature) | | If this is a request for allowable well, this form must be accompanied | by a tabulation of the deviation |
| Assist. Admin. Analyst | | tests taken on the well in accordance All sections of this form must be | |
| 1. | (Title) -27-82 | able on new and recompleted wells. Fill out only Sections I. II. III | . and VI for changes of owner, |
| (Date) | | well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply | |

well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply completed wells.