

Oil Conservation Division

P. O. Box 2088

Santa Fe, New Mexico 87501

Request for Allowable and Authorization to Transport Oil and Natural Gas

Artesia, Office

Operator

Ralph Nix

Address

P. O. Box 617 Artesia, New Mexico 88210

Reason(s) for filing (Check proper box)

New Well

Recompletion

Change in Ownership

Change in Transporter of:

Oil

Casinghead Gas

Other (Please explain)

CASINGHEAD GAS MUST NOT BE TRANSPORTED UNLESS AN EXCEPTION TO Rule 306 IS OBTAINED

DESCRIPTION OF WELL AND LEASE

Lease Name

DEBBIE

Well No.

1

Pool Name, Including Formation

Wildcat, Cisco Canyon

Kind of Lease

State, Federal or Fee

Fee

Lease No.

Location

Unit Letter

I

660

Feet From The

East

Line and

1980

Feet From The

South

Line of Section

11

Township

20S

Range

24E

NMPM,

Eddy

County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil

Navajo Crude Oil Purchasing Co.

Name of Authorized Transporter of Casinghead Gas

Address (Give address to which approved copy of this form is to be sent)

P. O. Box 175 Artesia, NM 88210

Is gas actually connected?

When

If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

Designate Type of Completion - (X)

X

X

X

X

X

X

X

X

X

Date Spudded

9/12/82

Date Compl. Ready to Prod.

4/25/82

Total Depth

9546'

P.B.T.D.

8042'

Elevations (DF, RKB, RT, GR, etc.)

3608' GL

Name of Producing Formation

Cisco Canyon

Top Oil/Gas Pay

7754'

Tubing Depth

7692'

Perforations

7754' - 7766', 2 shots per foot for total 25 shots

Depth Casing Shoe

8042' GL

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE

CASING & TUBING SIZE

DEPTH SET

SACKS CEMENT

17 1/2"

13 3/8" 48#

415 GL

425sx circulated

11"

8 5/8" 24#

1205' GL

400sx circulated

7 7/8"

5 1/2" 17#

8042' GL

800sx circulated

2 7/8" 6.5#

7692' GL

TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date First New Oil Run To Tanks

11/13/81

Date of Test

5/24/82

Producing Method (Flow, pump, gas lift, etc.)

Pump

Length of Test

24 hours

Tubing Pressure

125#

Casing Pressure

Choke Size

2"

Actual Prod. During Test

702

Oil-Bbls.

55

Water-Bbls.

647

Gas-MCF

162

GAS WELL

Actual Prod. Test-MCF/D

Length of Test

Bbls. Condensate/MMCF

Gravity of Condensate

Testing Method (pilot, back pr.)

Tubing Pressure (Stat-in)

Casing Pressure (Stat-in)

Choke Size

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

Ralph Nix, Jr

Title

5/26/82

Date

OIL CONSERVATION DIVISION

MAY 28 1982

APPROVED

BY

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.

Separate Forms C-104 must be filed for each pool in multiply completed wells.