

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

DEC 19 '88

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS O. C. D.
ARTESIA, OFFICE

I. Operator
Strata Production Company ✓

Address
648 Petroleum Bldg. Roswell, New Mexico 88201

Reason(s) for filing (Check proper box) Other (Please explain)

☒ New Well ☐ Change in Transporter of:
☐ Recompletion ☐ Oil ☐ Dry Gas
☐ Change in Ownership ☐ Casinghead Gas ☐ Condensate

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE *Turkey Track*

Lease Name Halcon State	Well No. #1	Pool Name, including Formation Wildcat Bone Springs	Kind of Lease State, xxxxxxx	Lease No. K-4169
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Location
Unit Letter G ; 1980' Feet From The North Line and 1980' Feet From The East
Line of Section 26 Township 19S Range 29E , NMPM, Eddy County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Navajo Refining Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 159 Artesia, New Mexico 88210	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) 820 M Plaza Office Bldg. Bartesville, OK	
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 26
	Twp. 19S	Rge. 29E
	Is gas actually connected? No	
	When ASAP	

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

James L. Mc Clellan
(Signature)
Vice-President
(Title)
12/16/88
(Date)

OIL CONSERVATION DIVISION

APPROVED _____, 19____
BY _____
TITLE _____

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.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
		X		X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.			
8-21-88	8-31-88		8412'			8372'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth			
3353.3 GL	Bone-Spring		8088'			8020'			
Perforations						Depth Casing Shoe			
8088' to 8248'						8412'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT				
15"	11 3/4"		365'		350 sx CI "C"				
11"	8 5/8" 32 & 34#		3135'		3000 sx Lite & 200 sx				
					CI "C" with 2% CaCl				
7 7/8"	5 1/2" 20 & 17#		8412'		500 sx Premium 3/1%				

V. TEST DATA AND REQUEST FOR ALLOWABLE (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.)	
Sept. 1, 1988	11-15-88	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.	200#	180#	
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
264.5 bbls total	115 bbls	149.5 bbls	250

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MACF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size