

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form C-104
Revised 10-1-78

RECEIVED

JUL 1 1982

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

| | |
|--|---|
| I. OPERATOR | |
| Operator Threshold Development Company ✓ | |
| Address Suite II-A, 777 Taylor St. Ft. Worth, Tx. 76102 | |
| Reason(s) for filing (Check proper box) | |
| New Well <input checked="" type="checkbox"/> | Change in Transporter of: |
| Recompletion <input type="checkbox"/> | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> |
| Change in Ownership <input type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |

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

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|----------------|---|--|---------------------|
| Lease Name Conoco 7 State | Well No. 11 | Pool Name, Including Formation E. Millman (Qn-Grybg) | Kind of Lease State, Federal or Fee State | Lease No. B-8096 |
| Location | | | | |
| Unit Letter <u>H</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>560</u> Feet From The <u>East</u> | | | | |
| Line of Section <u>7</u> Township <u>19 South</u> Range <u>29 East</u> , NMPM, <u>Eddy</u> 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"/> | Address (Give address to which approved copy of this form is to be sent) | | | | | |
| Conoco, Inc. | P.O. Box 2587, Hobbs, N.M. 88240 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | | | | | |
| Conoco, Inc. | P.O. Box 2587, Hobbs, N.M. 88240 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit B | Sec. 7 | Twp. 19S | Rge. 29E | Is gas actually connected? Yes | When April 1, 1982 |

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 <input checked="" type="checkbox"/> | Gas Well <input type="checkbox"/> | New Well <input checked="" type="checkbox"/> | Workover <input type="checkbox"/> | Deepen <input type="checkbox"/> | Plug Back <input type="checkbox"/> | Same Res'v. <input type="checkbox"/> | Diff. Res'v. <input type="checkbox"/> |
| Date Spudded 5/25/82 | Date Compl. Ready to Prod. 6/23/82 | | Total Depth 2505 | | P.B.T.D. 2156 | | | |
| Elevations (DF, RKB, RT, GR, etc.) GL 3369.8 KB 3374.8 | Name of Producing Formation Penrose | | Top Oil/Gas Pay 2149.5' | | Tubing Depth 2120 | | | |
| Perforations 2149.5 - 2153.5' | | | | | Depth Casing Shoe 2505 | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 12-1/4 | 8-5/8 | | 369 | | 185 SX | | | |
| 7-7/8 | 4-1/2 | | 2505 | | 575 SX | | | |
| | 2 3/8 | | 2130 | | | | | |

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 6/13/82 | Date of Test 6/28/82 | Producing Method (Flow, pump, gas lift, etc.) Pump | |
| Length of Test 24 hrs. | Tubing Pressure 200 psi | Casing Pressure 24 psi | Choke Size N/A |
| Actual Prod. During Test 4 BO, 82 BW | Oil-Bbls. 4 | Water-Bbls. 82 | Gas-MCF 37 |

GAS WELL

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

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

| | |
|--------------------------------------|----|
| OIL CONSERVATION DIVISION | |
| JUL 6 1982 | |
| APPROVED | 19 |
| BY <u>W. A. Gussert</u> | |
| TITLE <u>SUPERVISOR, DISTRICT II</u> | |

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 multiple-completed wells.

Bucky Burch
(Signature)

Area Manager

(Title)

June 29, 1982

(Date)