

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
ARTESIA OFFICE
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form C-104
Revised 10-1-78REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Exxon Corporation ✓
Address
P. O. Box 1600, Midland, TX 79702
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of: Oil ☐ Dry Gas ☐
Recompletion ☐ Casinghead Gas ☐ Condensate ☐
Change in Ownership ☐
Other (Please explain)
CASINGHEAD GAS MUST NOT BE
FLARED AFTER 6-26-84
EX # 2-760 UNTIL 1-24-87
UNLESS AN EXCEPTION TO:
RULE 306 IS OBTAINED

II. DESCRIPTION OF WELL AND LEASE

Lease Name New Mexico DC State	Well No. 4	Pool Name, including Formation Queen-Grayburg	Kind of Lease State, XXXXX/XXX	Lease N LG-1637
Location Unit Letter B : 660 Feet From The North Line and 1980 Feet From The East Line of Section 18 Township 19S Range 29# E, NMPM, Eddy				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183, Houston, TX 79702	
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 18
	Twp. 19S	Rgn. 29E
	Is gas actually connected? Flared	

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 ☒	Gas Well ☐	New Well ☒	Workover ☐	Deepen ☐	Plug Back ☐	Same Resv. ☐	Drill Res ☐
Date Spudded 3-3-84	Date Compl. Ready to Prod. 3-18-84	Total Depth 2620	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) 3377' GR	Name of Producing Formation Queen-Grayburg	Top Oil/Gas Pay 1984	Tubing Depth 2196					
Perforations 1984-2270	Depth Casing Shoe							
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE 12 1/4"	CASING & TUBING SIZE 8 5/8"		DEPTH SET 234		SACKS CEMENT 240			
7 7/8"	5 1/2"		2614		998			
	2 7/8"		2196					

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 tap oil able for this depth or be for full 24 hours)

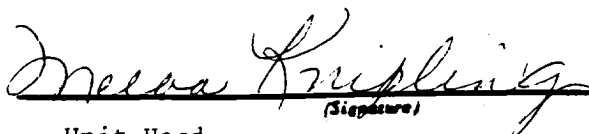
Date First New Oil Run To Tanks 3-18-84	Date of Test 3-31-84	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls. 15	Water - Bbls. 86	Gas - MCF 19

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, 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.


(Signature)

Unit Head

(Title)

April 13, 1984

(Date)

OIL CONSERVATION DIVISION

APPROVED APR 26 1984
Original Signed By
BY Leslie A. Clements
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 deviate 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 own well name or number, or transporter, or other such change of conditions.

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