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| TRANSPORTER OIL | ✓ | ✓ |
| TRANSPORTER GAS | | |
| OPERATOR | ✓ | ✓ |
| PRORATION OFFICE | | |

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C
Effective 1-1-65

RECEIVED BY
APR 19 1984
O. C. D.
ARTESIA, OFFICE

Operator
MorOilCo, Inc. ✓

Address
P.O. Drawer I, Artesia, NM 88210

Reason(s) for filing (Check proper box)
New Well [XX]
Recompletion [ ]
Change in Ownership [ ]

Change in Transporter of:
Oil [ ] Dry Gas [ ]
Casinghead Gas [ ] Condensate [ ]

Other (Please explain)

If change of ownership give name and address of previous owner

## I. DESCRIPTION OF WELL AND LEASE

| Lease Name | Well No. | Pool Name, Including Formation | Kind of Lease | Lease No. |
|---|---|---|---|---|
| Guajalote State | #1 | S Loco Hills-Q-G-SA | State, ~~Federal or Fee~~ | L-1022 |

Location
Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East

Line of Section 5 Township 19 Range 29 , NMPM, Eddy County

## II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| Name of Authorized Transporter of Oil [XX] or Condensate [ ] | Address (Give address to which approved copy of this form is to be sent) |
|---|---|
| Navajo Crude Oil Purchasing Company | P.O. Box 159, Artesia, NM 88210 |
| 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 | Sec. | Twp. | Rge. | Is gas actually connected? | When |
|---|---|---|---|---|---|---|
| | J | 5 | 19 | 29 | No | |

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

## III. COMPLETION DATA

| Designate Type of Completion – (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Re. |
|---|---|---|---|---|---|---|---|---|
| | X | | X | | | | | |

| Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. |
|---|---|---|---|
| 3/19/84 | 3/28/84 | 3000' | 2948' |
| **Elevations (DF, RKB, RT, GR, etc.)** | **Name of Producing Formation** | **Top Oil/Gas Pay** | **Tubing Depth** |
| 3403.1' GR | Grayburg | 2576' | 2670' |
| **Perforations** | | | **Depth Casing Shoe** |
| 2576 - 2658 | | | 3000' |

TUBING, CASING, AND CEMENTING RECORD

| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
|---|---|---|---|
| 12-1/4" | 8-5/8" | 350' | 240 sx. Cl. C Cement |
| | | | 6 yds. Ready-mix |
| 7" | 5-1/2" | 2980' | 500 sx. Cl. C Cement |
| | 2-3/8" | 2670' | |

## IV. 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)

OIL WELL

| Date First New Oil Run To Tanks | Date of Test | Producing Method (Flow, pump, gas lift, etc.) | |
|---|---|---|---|
| 3/28/84 | 3/28/84 | Pumping | Post IP-2 6-22-84 Pump + BK |
| **Length of Test** | **Tubing Pressure** | **Casing Pressure** | **Choke Size** |
| 24 hr. | | | |
| **Actual Prod. During Test** | **Oil-Bbls.** | **Water-Bbls.** | **Gas-MCF** |
| | 60 | 15 | TSTM |

GAS WELL

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

## V. CERTIFICATE OF COMPLIANCE

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.

Frank A. Morgan
(Signature)

Operator
(Title)

4/18/84
(Date)

OIL CONSERVATION COMMISSION

APPROVED APR 19 1984, 19

BY Original Signed 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 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

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Form C-105
Revised 11-1-58

NEW MEXICO OIL CONSERVATION COMMISSION
WELL COMPLETION OR RECOMPLETION REPORT AND LOG

RECEIVED BY
APR 19 1984
O. C. D.
ARTESIA, OFFICE

5a. Indicate Type of Lease: State XX Fee
5. State Oil & Gas Lease No.: L-1022

1a. TYPE OF WELL: Oil Well XX Gas Well Dry Other
b. TYPE OF COMPLETION: New Well XX Work Over Deepen Plug Back Diff. Resvr. Other
7. Unit Agreement Name:
8. Farm or Lease Name: Guajalote State
2. Name of Operator: MorOil Co, Inc. ✓
9. Well No.: #1
3. Address of Operator: P.O. Drawer I, Artesia, NM 88210
10. Field and Pool, or Wildcat: S. Loco Hills-Q-G-SA
4. Location of Well: UNIT LETTER J LOCATED 1980 FEET FROM THE South LINE AND 1980 FEET FROM THE East LINE OF SEC. 5 TWP. 19 RGE. 29 NMPM
12. County: Eddy

| 15. Date Spudded | 16. Date T.D. Reached | 17. Date Compl. (Ready to Prod.) | 18. Elevations (DF, RKB, RT, GR, etc.) | 19. Elev. Cashinghead |
|---|---|---|---|---|
| 3/19/84 | 3/24/84 | 3/28/84 | 3403.1 GR | |

| 20. Total Depth | 21. Plug Back T.D. | 22. If Multiple Compl., How Many | 23. Intervals Drilled By | Rotary Tools | Cable Tools |
|---|---|---|---|---|---|
| 3000' | 2948' | | → | Rotary | |

24. Producing Interval(s), of this completion — Top, Bottom, Name
2576 - 2658 ~~San Andres~~ Grayburg

25. Was Directional Survey Made: No

26. Type Electric and Other Logs Run
Litho Density - CN - GR - DLL - Micro - SFL

27. Was Well Cored: No

28. CASING RECORD (Report all strings set in well)

| CASING SIZE | WEIGHT LB./FT. | DEPTH SET | HOLE SIZE | CEMENTING RECORD | AMOUNT PULLED |
|---|---|---|---|---|---|
| 8-5/8" | 23# | 350 | 12-1/4" | 240 sx. Cl. C Cement<br>6 yds. Ready-mix | |
| 5-1/2" | 15.5# | 2980 | 7" | 500 sx. Cl. C Cement | |

29. LINER RECORD

| SIZE | TOP | BOTTOM | SACKS CEMENT | SCREEN |
|---|---|---|---|---|
| | | | | |

30. TUBING RECORD

| SIZE | DEPTH SET | PACKER SET |
|---|---|---|
| 2-3/8" | 2670' | |

31. Perforation Record (Interval, size and number)
2576-77-79-81-83-2601-02-04-06-08-10-26-28-55-57-58
16 holes .420

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

| DEPTH INTERVAL | AMOUNT AND KIND MATERIAL USED |
|---|---|
| 2576 - 2658 | 60,000 gal. gel. KCL<br>100,000 #20-40 sand |

33. PRODUCTION

| Date First Production | Production Method (Flowing, gas lift, pumping — Size and type pump) | Well Status (Prod. or Shut-in) |
|---|---|---|
| 3/28/84 | 2" x 1-1/2" x 12' RWBC Pump | Producing |

| Date of Test | Hours Tested | Choke Size | Prod'n. For Test Period → | Oil — Bbl. | Gas — MCF | Water — Bbl. | Gas—Oil Ratio |
|---|---|---|---|---|---|---|---|
| 4/4/84 | 24 | | | | | | |

| Flow Tubing Press. | Casing Pressure | Calculated 24-Hour Rate → | Oil — Bbl. | Gas — MCF | Water — Bbl. | Oil Gravity — API (Corr.) |
|---|---|---|---|---|---|---|
| | | | 60 | TSTM | 15 | |

34. Disposition of Gas (Sold, used for fuel, vented, etc.)

Test Witnessed By

35. List of Attachments
Deviation Survey

36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

SIGNED Frank S Morgan TITLE Operator DATE 4/18/84