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Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

RECEIVED

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

OCT 26 '90

O. C. D.  
ARTESIA, OFFICE

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator MYCO INDUSTRIES, INC. ✓	Well API No. 30-015-26476
Address 207 SOUTH 4th. ARTESIA, NM 88210	
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator <input type="checkbox"/> Other (Please explain)	
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name SAND DUNE STATE	Well No. 6	Pool Name, Including Formation TURKEY TRACK SR-Q-G-SA	Kind of Lease State, <del>Federal or Fee</del>	Lease No. B-9739-19
Location Unit Letter L : 1980 Feet From The SOUTH Line and 660 Feet From The WEST Line Section 11 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"/> KOCH OIL CO.	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 3609 MIDLAND, TX. 79702			
Name of Authorized Transporter of Casinghead Gas <input checked="" 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) 4001 PENBROOK STREET, ODESSA, TX. 79761			
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 11	Twp. 19s	Rge. 29e
Is gas actually connected?		When?		
YES		10/23/90		

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	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 10/01/90	Date Compl. Ready to Prod. 10/12/90	Total Depth 2639	P.B.T.D. 2564					
Elevations (DF, RKB, RT, GR, etc.) 3388.5 GR.	Name of Producing Formation QUEEN	Top Oil Gas Pay 2285	Tubing Depth 2356					
Perforations 2285, 2286, 2293, 2294, 2295, 2297, 2298, 2301, 2302, 2306			Depth Casing Shoe 2630					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4"	8 5/8"	383	250 sx. CIRCULATED					
7 7/8"	5 1/2"	2630	700 sx. CIRCULATED					
	2 3/8"	2356						

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 Tank 10/23/90	Date of Test 10/25/90	Producing Method (Flow, pump, gas lift, etc.) PUMPING	
Length of Test 24 HRS.	Tubing Pressure	Casing Pressure	Choke Size 11-2-90 Comp & B14
Actual Prod. During Test 80 BBLs	Oil - Bbls. 32	Water - Bbls. 48 Load Water	Gas - MCF 10

GAS WELL

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

VI. OPERATOR 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 W.A. Gressett  
Printed Name W.A. GRESSETT CONSULTANT  
Date 10/26/90 Telephone No. 748-1471

OIL CONSERVATION DIVISION

Date Approved OCT 30 1990

By ORIGINAL SIGNED BY  
MIKE WILLIAMS  
Title SUPERVISOR, DISTRICT II

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes