

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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

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

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator J.C. WILLIAMSON		CASINGHEAD GAS MUST NOT BE FLARED AFTER <u>12-7-85</u> UNLESS AN EXCEPTION FROM O.C.D. M. IS OBTAINED	
Address P.O. BOX 16 MIDLAND, TEXAS 79702		Re-enter	
Reason(s) for filing (Check proper box)		Other (Please explain)	
<input type="checkbox"/> New Well	Change in Transporter of:		
<input type="checkbox"/> 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		
Change of ownership give name and address of previous owner			
Cactus Drilling Corp.		W. Hwy. 80, Midland, Texas	

DESCRIPTION OF WELL AND LEASE

Well Name Canter Federal	Well No. 2	Pool Name, including Formation East Burton Flat Wolfcamp	Kind of Lease State, Federal or Fee Federal	Lease No. NM-0556290
Unit Letter A	990	Feet From The North Line and 990	Feet From The East	
Line of Section 10	Township 20	Range 29	NMPM, Eddy	County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> ONOCO INC.	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 2587 HOBBS, NEW MEXICO 88240
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> ONOCO INC.	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1267 PONCA CITY, OK 74603
Well produces oil or liquids, or location of tanks.	Is gas actually connected? When
Unit A Sec. 10 Twp. 20 Rge. 29	No

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.

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.

*[Signature]*

PRODUCTION

October 9, 1985

(Date)

OIL CONSERVATION DIVISION

APPROVED OCT 31 1985, 19  
BY Original Signed By  
Les A. Clements  
TITLE Supervisor District 11

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.

# COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well X	Workover X	Deepen X	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 7-20-85	Date Compl. Ready to Prod. 9-30-85	Total Depth 11,874'			P.B.T.D. 10,900'			
Locations (DF, RKB, RT, CR, etc.) 3315.2 GR	Name of Producing Formation Wolfcamp	Top Oil/Gas Pay 9431			Tubing Depth 9396'			
Perforations 9431-9461					Depth Casing Shoe			

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2"	13-2/8"	417'	circ. w/350 sx
12-1/4"	9-5/8"	3231'	circ. w/2200 sx
7-7/8"	5-1/2" *	11874'	1750 sx in 2 stages
	2-7/8"	9396'	

## 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 9-26-85	Date of Test 10-1-85	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs	Tubing Pressure 405	Casing Pressure Packer	Choke Size 13/64
Actual Prod. During Test	Oil - Bbls. 140	Water - Bbls. 0	Gas - MCF 156.6

GOR: 1119/1

## AS WELL

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