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

State of New Mexico
Energy, Minerals and Natural Resources Department

RECEIVED

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

OIL CONSERVATION DIVISION MAY 21 1991

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

O. C. D.
ARTESIA, OFFICE

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator ABO PETROLEUM CORPORATION		Well API No. 30-015-20750
Address 105 South 4th St., Artesia, NM 88210		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input checked="" type="checkbox"/>
Gas connected to pipeline.		

If change of operator give name and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lario Federal	Well No. 1	Pool Name, Including Formation Undes. Wolfcamp	Kind of Lease State, Federal or Fee	Lease No. NM 19598
Location Unit Letter <u>F</u> : <u>1650</u> Feet From The <u>North</u> Line and <u>1650</u> Feet From The <u>West</u> Line Section <u>20</u> Township <u>20S</u> Range <u>27E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Amoco Pipeline Intercorporate Trucking	Address (Give address to which approved copy of this form is to be sent) PO Box 702068, Tulsa, OK 74170-2068	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) Station X, Bartlesville, OK 74004	
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 20
	Twp. 27	Rge. 27
Is gas actually connected?	When? 5-20-91	

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 Res'v	Diff Res'v
Re-Entry		X						
Date Spudded 11-4-83	Date Compl. Ready to Prod. 11-12-83		Total Depth 8324'			P.B.T.D. 8253'		
Elevations (DF, RKB, RT, GR, etc.) 3250' GR	Name of Producing Formation Wolfcamp		Top Oil/Gas Pay 7990'			Tubing Depth 7933'		
Perforations 7990-8091'				Depth Casing Shoe 8297'				
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
	13-3/8"		419'			390 sx (in place)		
	8-5/8"		2750'			905 sx (in place)		
7-7/8"	5-1/2"		8297'			600 sx		
	2-7/8"		7933'					

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - bbls.	Water - Bbls.	Gas- MCF

GAS WELL

Actual Prod. Test - MCF/D 1565	Length of Test 2 hrs	Bbls. Condensate/MMCF 12.5	Gravity of Condensate 40+
Testing Method (pilot, back pr.) Back Pressure	Tubing Pressure (Shut-in) 1170	Casing Pressure (Shut-in) Pkr	Choke Size 16/64"

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.

Juanita Goodlett
Signature
Juanita Goodlett - Production Supervisor
Printed Name
5-20-91 Date (505) 748-1471 Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAY 22 1991
By ORIGINAL SIGNED BY
MIKE WILLIAMS
Title SUPERVISOR, DISTRICT II

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

- Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- All sections of this form must be filled out for allowable on new and recompleted wells.
- Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- Separate Form C-104 must be filed for each pool in multiply completed wells.