SE EINEC

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DISTRICT I
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State of New Mexico Energy, Minerals and Natural Resources Department Carrage 1 14 1993

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

OIL CONSERVATION DIVISION
P.O. Box 2088

Santa Fe, New Mexico 87504-2088

| STRICT BE OO Rio Reserve &d., Azzec, NM 87410 | REQUEST FOR | R ALLOWABL | E AND AL | JTHORIZA | ATION | | | | |
|---|---|---------------------|---------------------------|-------------------------------|---------------------------------|--|---------------------------------------|-------------|--|
| | TO TRANSPORT OIL AND NATURAL GAS | | | | Well Al | Well API No. | | | |
| erator | | | | | 30 | | 208 | 38 | |
| American National | Petroleum C | ompany | | | | <u> </u> | <u> </u> | | |
| dress | _ | | . 5 | | | | | | |
| P.O.Box 27725 Ho | uston, TX | 77227-772 | | | | | · · · · · · · · · · · · · · · · · · · | | |
| ISOD(8) for Filing (Check proper box) | | | Other | (Please explain | '' | | | | |
| w Weil | Change in Ti | ansporter of: | | | | | | | |
| completion | Oil 🗆 D | ry Gas 🗀 | | | | | | | |
| nange in Operator XXX | Casinghead Gas 🔲 C | codensate | | EFFECTI | VE 08 | 01/93 | | | |
| | ina Oil Cor | poration | Box 2 | 7725 F | lousto | n, TX | 7722 7- | 7725 | |
| DESCRIPTION OF WELL A | ND LEASE Well No. F | ool Name, Includia | e Formation | 1/ | , Kind o | | 1 . | se No. | |
| PATES STATE | = / | Berton Fla | f (Mon | ow][(sus | Size | decrai or Fee | K-3 | 977 | |
| ocation / | . 1980 | eet From The | V Line | and 19 c | 90 F | et From The _ | | Lin | |
| Unit Letter | 215 | Range 274 | E ,NM | PM, | =00 | la | | County | |
| 3,5545 | | | PAT GAS | | 6 | | | | |
| I. DESIGNATION OF TRANS ame of Authorized Transporter of Oil | or Condens | AND NATUR | Address (Give | address to whi | // | | TATT | u) 210-4 | |
| EATT Energy | Com | | DOL 4 | eddress to wh | 1400 | anne al chia di | | | |
| isme of Authorized Transporter of Ching | bood Gos 📛 | or Dry Gas 💢 | _ | eddress to will | ich approved | copy of this je | 77 7 | 7001 | |
| | ERM | | BOX | 2524 | 1tou | 1 + 3 / L | 1 | | |
| well produces oil or liquids, | | Twp. Rge. | is gas actually | connected? | When | | ~ ->- | _ | |
| ve location of tanks. | | 215127E | Ye | | | 4-1 | 5-75 | | |
| this production is commingled with that i | from any other lease or p | ool, give comming | ing order numb | er: | K/A_ | | | | |
| V. COMPLETION DATA | Dom any Commence of P | | | | | | | | |
| COMPLETION DATA | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v | Diff Res'v | |
| Designate Type of Completion | | | , | | 1 | 1 | <u></u> | <u></u> | |
| esta Spudded | Date Compl. Ready to | Prod. | Total Depth | | | P.B.T.D. | | | |
| levations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | | Top Oil/Gas Pay | | | Tubing Dep | Tubing Depth | | |
| Perforations | | | <u> </u> | | | Depth Casi | ng Shoe | | |
| | TIRING | CASING AND | CEMENTI | NG RECOR | D | | | | |
| | | | CLAVALATE | DEPTH SET | | | SACKS CEM | ENT | |
| HOLE SIZE | CASING & TU | BING SIZE | | DET THE | | | Post IO | -3_ | |
| | <u> </u> | | | | | | 11-22-9 | 73 | |
| | | | | | | | che or | 1 . | |
| | | | <u> </u> | | | + | ang of | | |
| 7. TEST DATA AND REQUE | ST FOR ALLOW | ABLE | | | | | | | |
| OIL WELL (Test must be after | recovery of total volume | of load oil and mus | t be equal to or | exceed top all ethod (Flow, p | owable for th ump, gas lift, | is depth or be esc.) | for full 24 No. | #3.) | |
| Date First New Oil Run To Tank | Date of Test | | | | | Choke Siz | <u> </u> | | |
| Length of Test | Tubing Pressure | | Casing Pressure | | | Gas- MCF | | | |
| Actual Prod. During Test | Oil - Bbis. | | Water - Bbls. | | | Gar Mc | | | |
| GAS WELL | | | | | | (C | Condensate | | |
| Actual Prod. Test - MCF/D | Length of Test | | Bbis. Condensate/MMCF | | | Gravity of Condensate | | | |
| Testing Method (pitot, back pr.) | Tubing Pressure (Shut-m) | | Casing Pressure (Shut-in) | | | Choke Size | | | |
| VI. OPERATOR CERTIFIC | CATE OF COM | PLIANCE | | OIL CO | NSER' | VATION | I DIVISI | ON | |
| I hereby certify that the rules and reg | ulations of the Oil Conse of that the information gi | rvation | | | | | | | |
| is true and complete to the best of my | // - | | Dat | e Approv | red | <u>L1 </u> | 1333 | | |
| myle c | Elwans | | By. | | | | y | | |
| Signature Carlyle Edwards | Operations | Technic | iah | OF | RIGINAL S | SIGNED B AMS | nios ii | | |
| Prised Name 09/08/93 | (713) 961- | Title | Titl | e Mi | JPERVIS | AMS OR, DIST | RIGT II | <u></u> | |
| 09/00/93 | | lephone No. | · | | | | | | |

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.

Production Clerk

July 5, 1988

(Title)

(Date)

JIL CONSERVATION DIVISIC.

| | JIL CONSERVA | TION DIVISIC. | | | | | | |
|---|--|--|--|--|--|--|--|--|
| CISTRIBUTION SANTAFE FILE | P. O. BO SANTA FE, NEW | x 2088 MEXICO 87501 | 30-015-20838 | | | | | |
| U.S.G.S. | REQUEST FOR | Z ALLOWABLE | RECEIVED | | | | | |
| TRANSPORTER GAS | 1A | -1- | | | | | | |
| OPERATOR PROBATION OFFICE | AUTHORIZATION TO TRANSF | PORT OIL AND NATURAL | GAS الله 1 عرب 1 الله | | | | | |
| Operator | | | | | | | | |
| Coquina Oil | = | | O. C. D. | | | | | |
| P.O. Box 2 | 7725 Houston, TX | 77227-7725 | | | | | | |
| Reason(s) for filing (Check proper box | | Other (Please expl | a in) | | | | | |
| New Well Recompletion | Change in Transporter of: Oil Dry Ga | s [] | | | | | | |
| Change in Ownership | Casinghead Gas Conden | sate X E1 | fective 7/1/88 | | | | | |
| f change of ownership give name | | | | | | | | |
| and address of previous owner | | | | | | | | |
| DESCRIPTION OF WELL AND | LEASE | | | | | | | |
| Yates State | Well No. Pool Name, Including Fo | 1 | Lease No. b, Federal or Fee State K-3977 | | | | | |
| Location | T Daviden Flage | | | | | | | |
| Unit Letter K : 198 | Peet From The West Line | e and <u>1980</u> Fe | et From The South | | | | | |
| Line of Section 10 To | waship 21S Range | 27Е , ммрм, | Eddy County | | | | | |
| DESIGNATION OF TRANSPOR | TER OF OIL AND NATURAL GA | S | | | | | | |
| Name of Authorized Transporter of Ci | | Address (Give address to which approved copy of this form is to be sent) | | | | | | |
| Enron Oil Trading & Ti | singhead Gas 🔲 💮 of Dry Gas 💟 | P.O. Box 1188 Houston, TX 77251-1188 Address (Give address to which approved copy of this form is to be sent) | | | | | | |
| El Paso Natural Gas Co Transwestern Pipeline | <u></u> | P.O. Box 1492 El Paso, TX 79978 Ps.O. Box 1492 El Paso, TX 77001 Ps.O. Box 1492 El Paso, TX 77001 Nov. 8, 1973 EPNG | | | | | | |
| If well produces oil or liquids, give location of tanks. | Vnli Sec. Twp. Rge. K 10 21S 27E | Yes April 15, 1975 TWPC | | | | | | |
| f this production is commingled with COMPLETION DATA | ith that from any other lease or pool, | | | | | | | |
| Designate Type of Completi | on - (X) | New Well Workover De | Plug Back Same Restv. Diff. Restv. | | | | | |
| Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Cil/Gas Pay | Tubing Depth | | | | | |
| | | | Doub Castes Shoe | | | | | |
| Perforations | | | Depth Casing Shoe | | | | | |
| | TUBING, CASING, AND | CEMENTING RECORD | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | | | | | |
| | | | 7-29-88 | | | | | |
| | | | Chalit B1 | | | | | |
| | | | | | | | | |
| TEST DATA AND REQUEST F | OR ALLOWABLE (Test must be a) | fter recovery of total volume of | load oil and must be equal to or exceed top allow- | | | | | |
| OIL WELL | able for this de | pth or be for full 24 hours) Producing Method (Flow, pun | np, gas lift, etc.) | | | | | |
| Date First New Oil Run To Tanks | Date of Yest | | | | | | | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size | | | | | |
| Actual Prod. During Test | Cil-Bbis. | Water-Bbls. | Gas - MCF | | | | | |
| | | | | | | | | |
| GAS WELL | | | | | | | | |
| Actual Prod. Tost-MCF/D | Length of Test | Bble. Condensate/MMCF | Gravity of Condensate | | | | | |
| Testing Method (pitot, back pr.) | Tuoing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choxe Size | | | | | |
| DEPARTMENT OF COURT 148 | CF | OII CONS | EERVATION DIVISION | | | | | |
| CERTIFICATE OF COMPLIAN | OL . | 6 2 3 1 | 1 2 2 1983 | | | | | |
| hereby certify that the rules and Division have been complied with | regulations of the Oil Conservation | 1 | | | | | | |
| bove is true and complete to th | e best of my knowledge and belief. | BY | riginal Signed By Mika Williams | | | | | |
| | | TITLE | | | | | | |
| <i>y</i> . ¬ . | | This form is to be | filed in compliance with MULE 1104. | | | | | |
| Sandra Use | | If this is a request | for allowable for a newly drilled or despened | | | | | |
| (Sign | iature) | well, this form must be accompanied by a tabulation of the deviation | | | | | | |

well, this form must be accompanied by a tabulation of tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for sliow-able 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