Appropriate Distinct Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

RECEIVED

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe. New Mexico 87504-2088

JAN 25 '90

| <u> ISTRICT III.</u> 000 Rio Brazos Rd., Aziec, NM 87410. | REQUEST FOR ALLOWAB | LE AND AUTHORIZAT | TION . | ra C D. | | | |
|---|---|------------------------------------|---------------------------------------|-----------------------|--------------|--------------|--|
| | TO TRANSPORT OIL | | | TESIA, OFFICE | ; | | |
| BHP Petroleum Com | many Inc. | | Well AP | l No. | | | |
| 5847 San Felipe S | | 77057–3005 | | | | | |
| Reason(s) for Filing (Check proper box) | | Other (Please explain) | | | | | |
| view Weil | Change in Transporter of: | | | | | | |
| Recompletion | Oil Dry Gas 🗓 | | | | | | |
| Change in Operator | Casinghead Gas Condensas | | | | | | |
| change of operator give name | | | · | | | | |
| I. DESCRIPTION OF WELL | AND LEASE | - Farming | Kund of | · · | | e No. | |
| Burton Flat Deep | nit 13 Burton Flat - Morrow | | | KORAKKA L-6322 | | | |
| ordine | onic is bereau | | · · · · · · · · · · · · · · · · · · · | | | | |
| Unit Letter 0 | 660 Feet From The | South Lim and 1980 | Fee | From The _Ea | ıst | | |
| Section 28 Towns | nip 20S Range 28E | NMPM, Ed | ddy | | | County | |
| III DESIGNATION OF TRA | NSPORTER OF OIL AND NATU | RAL GAS | | | | | |
| ne of Authorized Transporter of Oil or Condensate Address (Give address to which approved | | | | copy of this form | 12 10 DE 16A | 7 | |
| Name of Authorized Transporter of Case | ngheed Gas or Dry Gas | Address (Give address to which | approved (| come of thus form | u to be sen | <u> </u> | |
| Phillips 66 Natura | | | | | | | |
| If well produces ou or liquids, give location of tanks. | Unit Sec. Twp. Rgs. | is gas actually connected? Yes | 1/2/90 | | | | |
| If this production is commungled with the IV. COMPLETION DATA | K from any other lease or pool, give comming | Ling order aumber: | | | | | |
| | Oil Well Gas Well | New Well Workover | Deepes | Plug Back Sa | me Res'v | Diff Rasiv | |
| Designate Type of Completio | n - (X) | Total Depth | | P.B.T D. | | <u>L</u> | |
| | <u> </u> | · · · · = | | | | | |
| levauons (DF, RKB, RT, GR, etc.) Name of Producing Formation | | Top Oil/Gas Pay | | Tubing Depth | Tubing Depth | | |
| Perforacions | | 1 | | Depth Caung S | bos | | |
| | TUBING, CASING AND | CEMENTING RECORD | | 1 | | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | | SACKS CEMENT | | | |
| | | | | Part ID-3 | | | |
| | | | | 1-2-90 | | | |
| | | | | My GT: TPC | | | |
| V. TEST DATA AND REQU | FST FOR ALLOWARLE | | | رہے <u>!</u> | | | |
| | er recovery of total volume of load oil and mus | t be equal to or exceed too allows | ible for this | e depuix or be for | full 24 hour | '3.) | |
| Date First New Oil Rus To Task | Date of Test | Producing Method (Flow, pump | | | | | |
| Length of Test | Tubing Pressure | Casing Pressure | | Choke Size | | | |
| Actual Prod. During Test | Oil - Bhia. | Water - Bbis. | | Gas- MCF | | | |
| | | | | | | | |
| GAS WELL Actual Prof. Test - MCF/D | V | | | | | | |
| Actual Prod. Test - MCF/D | Leagth of Test | Bbis. Condenmis/MMCF | | Gravity of Condensals | | | |
| Testing Method (puos, back pr.) | Tubing Pressure (Shut-m) | Casing Pressure (Shut-in) | | Choke Size | | | |
| VI OPERATOR CEPTE | CATE OF COMPLIANCE | | | 1 | | | |
| I hereby certify that the rules and re | egulations of the Oil Conservation | OIL CONS | SERV | ATION D | IVISIC | NC | |
| Division have been complied with and that the information gives show | | | | 1845 0 | 4 4000 | | |
| is true and complete to the best of s | my knowledge and belief. | Date Approved | | JAN 3 | 1 1990 | | |
| Mina Kne | | | | | | | |
| Signature Signature | Production Tech. | | | SIGNED E | ŀΥ | | |
| Nina Jones | . MIK | MIKE WILLIAMS | | | | | |
| Primed Name 1/23/90 | (713) 780-5127 Tule | Title SUF | ERVIS | <u>OR, DISTR</u> | ICT If | | |
| 1/23/90 Date | Telephone 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.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.