Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico E. gy, Minerals and Natural Resources Department. RECEIVED

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

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

JUN 1 '90

| DISTRICTIII | | | |
|-----------------|-------------|----|-------|
| 1000 Rio Brazos | Rd., Aztec, | NM | 87410 |

O. REQUEST FOR ALLOWABLE AND AUTHORIZATION OFFICE

| | | TO TRA | NSPC | ORT OIL | AND NA | TURAL GA | | 51 KI | |
|--|--|--------------------------------------|---|---------------------------------------|---------------------------------------|-------------------------------|-------------------------|--|----------------------|
| Operator J.C. Williamson | | | | | | | Well A | Pi No. | |
| Address P.O. Box 16 | Midlan | d. Tev: | | 79702 | | | | | |
| Reason(s) for Filing (Check proper box) New Well Recompletion X Plug-b | • | Change in | | nter of: | Ot | FLARED | AFTER | S MUST N |) . |
| Change in Operator | Casinghea | | Conden | | | ulias. | HI EXCE | PTION FRO | DAA |
| f change of operator give name and address of previous operator | | | | | | InE B. L. | | | |
| u. DESCRIPTION OF WELL | AND LEA | | D | T14 | - Fa-matlam | | Vind | of Lease | Lease No. |
| T.O.G Federal | Well No. Pool Name, Including 4 East Burto | | | | | | Federal or Fee | NM-0554771 | |
| Location | 1 | 2001 | | N | | 660 | | | West line |
| Unit LetterE | _ : | 980' | Feet Fro | om The NO | orth_L | ne and660 | Fe | et From The | west Line |
| Section 16 Townshi | ip | 20S | Range | | 29E ,1 | NMPM, | Eddy | | County |
| III. DESIGNATION OF TRAN | SPORTE | R OF O | | D NATU | Address (G | ive address to w | | copy of this forn | |
| Navajo Refining Co. | | | | | | | | ia, NM 8 | |
| Name of Authorized Transporter of Casin Delaware Natural Gas | | _ [X] c. | or Dry | Gas | Address (G 9111 J | ive address to w ollyville | hich approved Rd.,#2 | copy of this form 15 Austi | n, Tx 78759 |
| If well produces oil or liquids, give location of tanks. | Unit E | | Twp. 20 | Rge. 29 | | | | | |
| If this production is commingled with that IV. COMPLETION DATA | from any ou | ner lease or | pool, giv | e commingl | ing order nu | mber: | | | |
| Designate Type of Completion | ı - (X) | Oil Well | (| Gas Well | New Wel | II Workover | Deepen | Plug Back S | ame Res'v Diff Res'v |
| Date Spudded Plug back 05/24/90 | | pl. Ready to | o Prod. | | Total Depti OTD 11 | h | <u> </u> | P.B.T.D. 5076' P | BTD Post JD-2 |
| Elevations (DF, RAB, RT, GR, etc.) 3270 GR | | Name of Producing Formation Delaware | | | Top Oil/Gas Pay 3136 ' | | | Tubing Depth 7-6-90 3110' comp + BK | |
| Perforations 3141-42-49-50-51-59-6 | 6-67-68 | -691 | | | | | | Depth Casing | Shoe / |
| 3141-42-49-30-31-39-0 | | | CASI | NG AND | CEMENT | TING RECO | RD | | |
| HOLE SIZE | | ASING & T | | | DEPTH SET | | SACKS CEMENT | | |
| 15" | - | 13-3/8 | | | 576' | | 650 sx | | |
| 12-1/4" | | 8-5/8" | | | 3109' | | | 1900 sx | |
| 7-7/8" | | 5-1/2" | | | 5 | 076' | | tie back w/800 sx | |
| | | 2-7/8" | | | 3 | 3110' | | | |
| V. TEST DATA AND REQUE | EST FOR | ALLOW | ABLE | , | | or exceed ton a | llouable for th | is denth or be fo | r full 24 hours.) |
| OIL WELL (Test must be after | | | of load | oil and mus | Producing | Method (Flow,) | ownp, gas lift, | etc.) | |
| Date First New Oil Run To Tank | Date of T | | | | | | | • | |
| 05/28/90 | | 0/90 | | | Flowing Casing Pressure | | | Choke Size | |
| Length of Test | _ | Tubing Pressure 0-170# | | Pkr. | | | 5/8" | | |
| 24 hrs Actual Prod. During Test | Oil - Bbls. | | Water - Bbis. | | | Gas- MCF | | | |
| Verified Liter During Lear | During Test Oil - Bois. | | 196 | | | 153.6 | 153.6 | | |
| GAS WELL | | | | | | | 800/1 | -18 | -1 |
| Actual Prod. Test - MCF/D | Length o | (Test | | | Bbls. Con | densate/MMCF | | Gravity of Co | ondensale |
| Testing Method (pitot, back pr.) | Tubing F | ressure (Sh | ut-in) | | Casing Pr | essure (Shut-in) | | Choke Size | |
| VI. OPERATOR CERTIFI | CATE O | F COM | PLIA | NCE | | OIL CO | NSER\ | ATION [| OIVISION |
| 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. | | | Date ApprovedJUN 2 9 1990 | | | | | | |
| 1011 | | | | 7 | 1 | | | SIGNED B | Y |
| Signature J.C. Williamson Owner | | | By ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT IP | | | | | | |
| Printed Name 05/31/90 | | 91 | Tide 15/68 | 2-1797 | ∭ Ti | tle | | <u></u> | |
| Date | | | elephone | No. | | NUMBER OF STREET | | | 7,01 |
| The second of th | reconstitution | A helb task a fire | | 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | (A) 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 | . 4 | | | |

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.