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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-11
Effective 1-1-65

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APR 17 1980

| | | | | |
|---|--|--|--|------------------------|
| Operator | Exxon Corporation ✓ | | | O. C. D. |
| Address | P. O. Box 1600, Midland, TX 79702 | | | ARTESIA, OFFICE |
| Reason(s) for filing (Check proper box) | New Well <input checked="" type="checkbox"/> Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input checked="" type="checkbox"/> Recompletion <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> Change in Ownership <input type="checkbox"/> | | | Other (Please explain) |

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|---|----------|--------------------------------|-------------------------------|-----------|
| Lease Name | Well No. | Pool Name, including Formation | Kind of Lease | Lease No. |
| New Mexico "CW" State | Com 1 | Burton Flat Morrow | State, Under lease | 06-6027 |
| Location | | | | |
| Unit Letter <u>I</u> : <u>660</u> Feet From The <u>East</u> Line and <u>1580</u> Feet From The <u>South</u> | | | | |
| Line of Section <u>16</u> Township <u>21-S</u> Range <u>27-E</u> , NMPM, County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | | |
|--|--|------|------|------|----------------------------|---------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | | | | | |
| El Paso Natural Gas | Box 1384, Jal, NM 88252 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit | Sec. | Twp. | Pge. | Is gas actually connected? | When |
| | | | | | Yes | 4-16-80 |

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. |
| | | | X | X | | | | | |
| Date Spudded | Date Compl. Ready to Prod. | Total Depth | | P.B.T.D. | | | | | |
| 5-24-79 | 10-25-79 | 11749 | | 11701 | | | | | |
| Elevations (DF, RKB, RT, CR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | | Tubing Depth | | | | | |
| 3277 RKB | Morrow | 11174 | | 10900 | | | | | |
| Perforations | | | | Depth Casing Shoe | | | | | |
| 11174-11498 (41 shots) | | | | 11743 | | | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | | |
| HOLE SIZE | | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 17 1/2 | | 13 3/8 | | 619 | | 750 sx | | | |
| 12 1/4 | | 9 5/8 | | 2900 | | 2150 sx | | | |
| 8 3/4 | | 7 | | 11743 | | 2550 sx | | | |
| | | 2 7/8" | | 10900 | | | | | |

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 Tanks | 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 | Length of Test | Bbls. Condensate/MCF | Gravity of Condensate |
| 750 | 3 | | |
| Testing Method (pilot, back pr.) | Tubing Pressure (Shut-in) | Casing Pressure (Shut-in) | Choke Size |
| Well Test | 880 | PKR | 3/4 |

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Marvin Ochs
(Signature)

Unit Head

(Title)

4-16-80

(Date)

OIL CONSERVATION COMMISSION

APPROVED APR 18 1980
BY W. A. Gressitt
TITLE SUPERVISOR, DISTRICT H

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 completion 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 re-completed 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.