

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

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

DISTRICT III  
1000 Rio Brazos Rd, Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department

## OIL CONSERVATION DIVISION

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

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

RECEIVED

SEP 10 1993

O.C.D.

### REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator NATIONAL ENERGY GROUP, INC.		Well API No. 3001520808
Address 4925 GREENVILLE AVE. SUITE 1400 DALLAS, TX 75206		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Other (Please explain) Recompletion <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator		

### II. DESCRIPTION OF WELL AND LEASE

Lease Name YATES-KING	Well No. 1	Pool Name, Including Formation Frontier Hill Strawn STRAWN	Kind of Lease State, Federal or Fee XXXXXXX	Lease No. 20808
Location Unit Letter K : 1980 Feet From The SOUTH Line and 1980 Feet From The WEST Line Section 22 Township 23S Range 26E, NMPM, EDDY 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"/> PLAINS Mfg & Trans	Address (Give address to which approved copy of this form is to be sent) 10 DESTA DR #200E MIDLAND, TX 79705					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> LLANO, INC.	Address (Give address to which approved copy of this form is to be sent) 921 W. SANGER HOBBS, NM 88240-4917					
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 22	Twp. 23S	Rge. 26E	Is gas actually connected? YES	When? 8/10/93

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						
Date Spudded	Date Compl. Ready to Prod. 6/5/93		Total Depth 11,960		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation STRAWN		Top Oil/Gas Pay 10469		Tubing Depth 10412			
Perforations 10469-76					Depth Casing Shoe			

### TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT Part ID-2 10-1-93 P & A M & C comp Str.

### 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 347	Length of Test 24 HRS.	Bbls. Condensate/MMCF 0	Gravity of Condensate 0
Testing Method (pilot, back pr.) BACK PR	Tubing Pressure (Shut-in) 3940	Casing Pressure (Shut-in) PKR	Choke Size 1/4"

### 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.

Signature  
THOMAS A. RUBIS PRODUCTION MANAGER  
Printed Name  
9/7/93 214-692-9211  
Date Telephone No.

### OIL CONSERVATION DIVISION

Date Approved SEP 14 1993

By ORIGINAL SIGNED BY  
MIKE WILLIAMS  
Title SUPERVISOR, DISTRICT II

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.