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State of New Mexico Energy, Minerals and Natural Resources Department

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

## OIL CONSERVATION DIVISION MAY 1 3 1992

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

O. C. D.

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 8741	Santa Fe, New Mexico 87504-20				<b>€</b>	), C. D. ■A <b>~</b> FICE				
I.	REQUEST FO	R ALLOWA	ABLE AND	AUTHOE	RIZATION	-				
Operator	TO TRAN	SPORT O	IL AND NA	TURAL	AS	ı				
Vintage Petrol	Vintage Petroleum, Inc.							I API No.		
Address				30-015-20950						
4200 One Willi Reason(s) for Filing (Check proper box	ams Center	Tulsa, Ok	clahoma 7	4172						
New Well			Oth	et (Please exp	lain)					
Recompletion	Change in Tr	ansporter of: ry Gas	No Cha	nge. Pui	chasers	listed	nelow b	1270		
Change in Operator		ondensate	peen o	n record	l. Well	has not	roduce	ed		
If change of operator give name and address of previous operator			since	2/87.				··		
II. DESCRIPTION OF WELI	ANDIFACE		1 11 1/1	<del>/</del>		<del></del>		<del></del>		
Lease Name	ding Formation	<u>.                                    </u>	92' 0	<del></del>						
Allied State	1	Carlsbad	, S. (Str	awn)	State	of Lease Federal or Fee		Lease No. 4538		
Unit Letter I	. 1980 E	0								
		et From The S	Outh Line	and99	<u>0                                    </u>	eet From The _	East	Line		
Section 10 Townsh	nip 23 S Ra	nge 26 1	E , NM	ГРМ,			Eddy	C		
III. DESIGNATION OF TRAN	SPORTER OF OU	AND NATTI	DAI CAC					County		
The state of the s	or Condensate	( <del>-11-</del>	Address (Give	address to w	ich approved	copy of this for	- in an B			
Enron Oil Trading & T Name of Authorized Transporter of Casin	ransportation C	Ompany	<u> </u>	ox 1188	Housto	ים דע איז	261 116	٠.		
El Paso Natural Gas C		Dry Gas 🕎		CALLETT IO WI	uch approved	copy of this for	n is to be se	ent)		
If well produces oil or liquids, give location of tanks.	Unit Sec. Tw	p. Rge.	P O B	0x 1492	El Pas	o, TX 79	978			
	1 1 10 100	۔ مام	1		When					
If this production is commingled with that IV. COMPLETION DATA	from any other lease or pool,	give comming!	ing order numbe	r: _N,	'A	4-28-9				
	Oil Well	Gas Well	New Well	Workover	Danie I	la				
Designate Type of Completion  Date Spudded	_ ' '	X	1 1	W CHROVE!	Deepen	Plug Back S	me Res'v	Diff Res'v		
1-27-92	Date Compl. Ready to Prod 4-28-92	L	Total Depth		<del></del>	P.B.T.D.		<del></del>		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Format	Top Oil/Gas Pay			11575					
3315 KB, 3300 GR Strawn			10378			Tubing Depth				
10552-64 & 10				10490 ' Depth Casing Shoe						
10332-04 & 10	CENENTEN	C RECOR		11935'						
HOLE SIZE	CASING & TUBING SIZE		CEMENTING RECORD DEPTH SET							
7 7/8	5 1/2" csg 2 3/8" tbg		csg: 11935' tbg:10490'			SACKS CEMENT 640 sx				
							SX			
			<del>-</del>				ID-2			
V. TEST DATA AND REQUES			<del></del>				19-92			
OIL WELL (Test must be after re Date First New Oil Run To Tank	covery of total volume of load	d oil and must b	e equal to or ex	ceed top allow	able for this	depth or be for j	ull 24 hours	r.)		
	Date of Test		Producing Metho	od (Flow, pun	φ, gas lift, etc	i.) P41	mor			
length of Test	Tubing Pressure		Casing Pressure			Choke Size	<del></del>			
Actual Prod. During Test	Oil - Bbls.	NI - Dhie			Water - Bbis					
	он - <b>Боів.</b>		Matel - Bolf		[	Gas- MCF				
GAS WELL			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		<del></del>				
Actual Prod. Test - MCF/D 269	Length of Test	Bbls. Condensate/MMCF			Gravity of Condensate					
esting Method (pitot, back pr.)	5 hours Tubing Pressure (Shut-in)		15			50°				
Back PR	4400#	1	Casing Pressure	(Shut-in)		Choke Size				
I. OPERATOR CERTIFICA		NCE		<del></del>	<del></del>	25/64				
I hereby certify that the rules and regular	ions of the Oil Conservation	11	Ol	L CONS	SERVA	TION DI	VISIO	V		
Division have been complied with and that the information given above is true and somplete to the best of my knowledge and belief.										
F. 1/1			Date A	pproved	M	AY 2 0 19	92			
f flum Gen			B CRICKEN CLONED BY							
Signature Leann Opee Supervisor, Regulatory Affairs			By ORIGINAL SIGNED BY MIKE WILLIAMS							
Printed Name Title			Title SUPERVISOR, DISTRICT 19							
April 30, 1992 (918) 592-0101 Date Telephone No.			11110							

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.