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Appropriate District Office  
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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

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

APR 03 '88

O. C. D.  
ARTESIA OFFICE

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator	Great Western Drilling Company	Well API No.
Address P. O. Box 1659, Midland, Texas 79702		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> "Re-entry" Change in Transporter of: Recompletion <input 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"/> Other (Please explain) "Re-entry" Drlg. in 1980		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Mosley Spring "32" State Com	Well No. 2	Pool Name, Including Formation Dark Canyon-Penn Gas Pool	Kind of Lease State, Federal or Fee	Lease No. V-2627
Location Unit Letter N : 660 Feet From The South Line and 2,030 Feet From The West Line Section 32 Township 23-S Range 25-E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

SCURLOCK PERMIAN CORP EFF 9-1-91

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Box 1183, Houston, Texas 77251-1183					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> Pinnacle Natural Gas Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 11248, Midland, Texas 79702					
If well produces oil or liquids, give location of tanks.	Unit N	Sec. 32	Twp. 23-S	Rge. 25-E	Is gas actually connected? Yes	When? Est. 4-5-89

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 "Re-entry" 10-27-88	Date Compl. Ready to Prod. 11-15-88		Total Depth Drlg. out plugs to 10,102' KBM			P.B.T.D. 10,065' KBM		
Elevations (DF, RKB, RT, GR, etc.) 3,840.4' KBM	Name of Producing Formation Strawn		Top Oil/Gas Pay (Gas) 9,566'			Tubing Depth 9,521.64'		
Performances 9,566' - 9,588' (1-SPF, 23 holes)						Depth Casing Shoe 10,101.23' KBM		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8", 48#/ft.		400'		700 Sxs - Circ.			
12-1/4"	9-5/8", 36#/ft.		3,050' (2895 Sxs + 4 yds Redi-mix)		Circ			
8-1/2"	4 1/2", 11.6 & 13.5#/ft		10,101.23'		970 Sxs "H", T-Cmt, 7,760			
	2-3/8" Tbg		9,521.64'					

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 AOF 2.645 Mcf/day	Length of Test 4 hrs.	Bbls. Condensate/MMCF 2-Bbls.	Gravity of Condensate 57.4° @ 60°
Testing Method (pilot, back pr.) 1-Point Back Press	Tubing Pressure (Shut-in) Test 3,162	Casing Pressure (Shut-in) Packer	Choke Size 4/64"-7/64"-10"/64"-14/64"

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 M. B. Myers  
M. B. Myers Ass't to Gen. Supt.  
Printed Name  
3-31-89 (915) 682-5241  
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved APR 27 1989

By Original Signed By  
Mike Williams

Title

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.