## NO. OF COPIES RECEIVED NEW MEXICO OIL CONSERVATION COMPANION CISTRIBUTION Supersedes Old C-104 and C-110 REQUEST FOR ALLOWABLE RECEIVED FILE AND 1 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS U.S.G.S. LAND OFFICE 1982 APR 9 TRANSPORTER GAS O. C. D. OPERATOR ARTESIA, OFFICE PRORATION OFFICE El Paso Natural Gas Company / 1800 Wilco Building - Midland, Texas 79701 Reason(s) for filing (Check proper box) Other (Please explain) $\mathbf{x}$ Dry Gas Recompletion Casinghead Gas Change in Ownership If change of ownership give name and address of previous owner \_\_\_\_ Pool Name, Including Formation Baldrikge II. DESCRIPTION OF WELL AND LEASE Kind of Lease State, Federal or Fee State Jurnegan State Com. ge Can<u>yon (Morrow)</u> Location Feet From The <u>East</u> ; 2201.5 Feet From The North Line and 1670 Unit Letter G Range 24E , NMPM, 24S <u>Eddy</u> . Township Line of Section III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas 🗓 El Paso Natural Gas Company 1800 Wilco Building - Midland, Texas 79701 Is gas actually connected? Twp. Rge. Unit Sec. If well produces oil or liquids, give location of tanks. 3-31-82 4<del>-8-82</del> Yes If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Plug Back Same Res'v. Diff. Res'v. New Well Workover Oil Well Gas Well Designate Type of Completion -(X)X Total Depth P.B.T.D. Date Spudded Date Compl. Ready to Prod 10,933 10,854 10-5-81 3-8-82 Top Oil/Gas Pay Tubing Depth Name of Producing Formation Pool 10.604.54 10,683 Balderidge Canyon Morrow Depth Casing Sh 10,683-10-701 1 SPF (19 Holes) : 10,800,01,02,06,07,08,09,13 14, 15, (10 holes) 1 SPF L SPF (6 holes) 10,933 10,788-10,793 TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE DEPTH SET HOLE SIZE 580 484.00 13 3/8 17岁 12岁 2130 9 5/8 2660.00 8 3/4 41/210933.00 1780 (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) V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date of Test Date First New Oil Run To Tanks Choke Size Casing Pressure Tubing Pressure Length of Test Gas - MCF Oil-Bbls. Water-Bbls. Actual Prod. During Test

**GAS WELL** Bbls. Condensate/MMCF Gravity of Condénsate Actual Prod. Test-MCF/D Length of Test 2,241 4 hours 0 Casing Pressure Choke Size Testing Method (pitot, back pr.) Tubing Pressure 3/8" Back pr. 670 (Stab) Pkr

## 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.

(Date)

Supervisor Production Services

(Title)

April 8, 1982

OIL CONSERVATION COMMISSION

APR 2 7 1982 APPROVED

SUPERVISOR, DISTRICT I TITLE .

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 deviation 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 recompleted wells.

Fill out Sections I, II, III, and VI only for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.