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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  
  
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APR 2 '90

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator OGS Operating Co., Inc.	Well API No. 30-015-26168
Address 550 W. Texas, Suite 1140, Midland, Texas 79701	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	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"/>
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Mosley Canyon "5" State Com	Well No. 1	Pool Name, including Formation Und Strawn	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter N : 660 Feet From The South Line and 1980 Feet From The West Line Section 5 Township 24-S Range 25-E, NMPM, Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate Amoco Production Co. ROCH	Address (Give address to which approved copy of this form is to be sent) P O Box 1775, Midland, Texas 79702
Name of Authorized Transporter of Casinghead Gas or Dry Gas El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) 1 Petroleum Centre, Bldg 2, 3300 N A, Midland, Texas 79701
If well produces oil or liquids, give location of tanks.	Unit N Sec 5 Twp. 24-S Rge. 25-E Is gas actually connected? no When? 4-30-90 5-12-90
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 12-13-89	Date Compl. Ready to Prod. 1-29-90	Total Depth 9910'	P.B.T.D. 9680'					
Elevations (DF, RKB, RT, etc.) 3846.4	Name of Producing Formation Strawn	Top Oil/Gas Pay 9558'	Tubing Depth 9452'					
Perforations 9558'-9572'			Depth Casing Shoe 9910'					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 17-1/2"	CASING & TUBING SIZE 13-3/8"	DEPTH SET 400	SACKS CEMENT 520					
12-1/4"	8-5/8"	2590	1190					
7-7/8"	5-1/2"	9910	300					
		2 3/8	9452					

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 2181	Length of Test 4 hrs	Bbls. Condensate/MMCF 28.1	Gravity of Condensate 62.1°
Testing Method (prior, back pr.) back pressure	Tubing Pressure (Shut-in) 2685	Casing Pressure (Shut-in) 0	Choke Size 1.25"

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  
Mickey Dobson, Vice President, Drlg & Prod

Printed Name  
3-22-90 (915) 682-6373

Date  
Telephone No.

OIL CONSERVATION DIVISION

Date Approved  
MAY 31 1990

By  
ORIGINAL SIGNED BY  
MIKE WILLIAMS  
SUPERVISOR, DISTRICT II

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.