Submit 5 Copies
Appropriate District Office
BISTRICT I Box 1980, Hobbs, NM 88240

State of New Mexico Ene: \_\_, Minerals and Natural Resources Department

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

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

## **OIL CONSERVATION DIVISION**

P.O. Box 2038

Santa Fe, New Mexico 87504-2088

MAY 1 8 1992

RECEIVED

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410		•	exico 8/304-2088		AY 1 8 1992		
			BLE AND AUTHORIZA		Q. C. D.		
I. Operator	1018/	ANSPORT OIL	AND NATURAL GAS		VPI No.		
	Kaiser-Francis Oil Company				UL NO. 0-015-26870		
Address		,			0 013 2007		
P. O. Box 21468	, Tulsa, OK	74121-1468	····				
Reason(s) for Filing (Check proper box)			Other (Please explain	ı)			
New Well	~~	n Transporter of:					
Recompletion	Oil L	Dry Gas					
Change in Operator	Casinghead Gas	Condensate					
If change of operator give name and address of previous operator	· · · · · · · · · · · · · · · · · · ·						
II. DESCRIPTION OF WELL	AND LEASE						
Lease Name	Well No.   Pool Name, Including				of Lease	Lease No.	
Willow Lake	2	Willow Lak	te (Atoka)	State,	Federal or Fee		
Location					_	_	
Unit Letter B	:990	_ Feet From The No	orth Line and 1980	Fe	et From TheE	last Line	
Section 22 Township	p 24S	Range 28	E , NMPM,		Eddy	County	
III. DESIGNATION OF TRAN	SPORTER OF C	IL AND NATII	RAL GAS				
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 Casing	Address (Give address to which approved copy of this form is to be sent)						
El Paso Natural Gas Co		or Dry Gas X		P. O. Box 1492, El Paso, TX 79928			
If well produces oil or liquids,	well produces oil or liquids, Unit Sec. Twp. R						
ive location of tanks.			No year		WOPE 6-1-92		
If this production is commingled with that if	from any other lease or	pool, give commingl	ing order number:				
IV. COMPLETION DATA	Oil Wel	II Gas Well	New Well   Workover	Deemen	Dive Beats Com	- Davis - Internation	
Designate Type of Completion		l Cas well	New Well   Workover	Deepen	Plug Back  Sam	e Res'v   Diff Res'v   	
Date Spudded	Date Compl. Ready t	to Prod.	Total Depth		P.B.T.D.		
1/6/92	4/28/92		11825		11703		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth		
3006 GR Perforations	Atoka		11679		11640		
renorations		11679' -	116021		Depth Casing Sho		
	TURING		CEMENTING RECORD		<u> </u>	11822	
HOLE SIZE	T	· - · · · · · · · · · · · · · · · · · ·	DEPTH SET	1110	T SACI	O OFMENT	
17 1/2	CASING & TUBING SIZE				SACKS CEMENT 450		
12 1/4	† · · · · · · · · · · · · · · · · · · ·		449		1165		
8 3/4	9 5/8		2575 10463		* · · · · · · · · · · · · · · · · · · ·		
6	4 1/2 (Liner)		10206 - 11822		<u> </u>	1610	
. TEST DATA AND REQUEST FOR ALLOWABLE			10200 - 110	122	1	296	
OIL WELL (Test must be after re			be equal to or exceed top allow	able for this	s depth or be for fu	ll 24 hours.)	
Date First New Oil Run To Tank	Date of Test		Producing Method (Flow, pum				
Length of Test	Tution D		Casina Pro		Choke Size		
Length of Test	Tubing Pressure		Casing Pressure		CHUNG SILE		
Actual Prod. During Test	Oil - Bbls.		Water - Bbls.		Gas- MCF		
GAS WELL					<del></del>		
Actual Prod. Test - MCF/D	Length of Test		Bbls. Condensate/MMCF		Gravity of Condensate		
1137	24 hrs.		0		_		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)		Choke Size		
24 hr. flow	590		Pkr	•		24/64	
VI. OPERATOR CERTIFIC	ATE OF COM	PLIANCE		, — — ·	ATION : 5 **		
I hereby certify that the rules and regula			OIL CONS	>=HV	ATION DIV	ISION	
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			Fitness				
is true and complete to the best of my k	mowledge and belief.		Date Approved		JUN 3 6	1992	
C. Parlante							
Simon / White			Bý ORIGINAL SIGNED BY				
Signature Charlotte Van Valkenbu	urg, Tech. Co	<i>0</i> oordinator	-,		WILLIAMS	DIOT 15	
Printed Name		Title	Title	SUPE	RVISOR, DIST	RILLI	
5/13/92	918-49						
Date	Tel	ephone No.	H				

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.