			CISE	
– Submit 5 Corres Appropriate Distinct Office DISTRUCT 1	State of New i Energy, Minerals and Natural		Form C-104 CT Revised 1-1-89	
P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION		See Instructions at Bottom of Page	
DISTRICT II P.O. Drawer DD, Anena, NM 88210	P.O. Box		PER EIVER "	
	Santa Fe, New Mexic		MAY 9 3 199 3	
1000 Kio Brazos Rd., Artec, NM 87410	REQUEST FOR ALLOWABLE		ON 3 1993	
I	TO TRANSPORT OIL A			
Operator			Well API No.	
Address	perating Partners, L.P.		30-015-27169	
	ite 1330, Midland, Texas	79701		
Reason(s) for Filing (Check proper box)		Other (Please explain)		
New Well XX Recompletion	Change in Transporter of: Oil Dry Gas			
Change in Operator	Casinghead Gas Condensate			
If change of operator give name and address of previous operator				
II. DESCRIPTION OF WELL				
Lease Name	Well No. Pool Name, Including	Formation	Kindrof Lease Lease No.	
Warthog 2 State		ura Bend (Delaware		
Location				
Unit LetterA	_ : 330 Feet From The No	rth Line and 660	Feet From TheEastLine	
Section 2 Township	<u> 235 Range 28E</u>	, NMPM,	EddyCounty	
TT DEFICILITION OF TO IN			County	
Name of Authonzed Transporter of Oil	SPORTER OF OIL AND NATUR		pproved copy of this form is to be sent)	
Texaco Trading and Tr	ansportation		dland, Texas 79711	
Name of Authonzed Transporter of Casing	ghead Gas 🔀 or Dry Gas 🥅 🖊	Address (Give address to which a	pproved copy of this form is to be sent)	
Continental Natural G I' well produces oil or liquids,		<u>P.O. Box 21470, Tu</u>	1sa, Oklahoma 74121	
give location of tanks.	Unit Sec. Twp. Rge. 1 H 2 235 28E	is gas actually connected? Yes	When 7	
If this production is commingled with that	from any other lease or pool, give comminglin		April 30, 1993	
IV. COMPLETION DATA				
Designate Type of Completion	- (X) Oil Well Gas Well	New Well Workover D	eepen Plug Back Same Res'v Diff Res'v	
Date Spudded		Total Depth	P.B.T.D.	
<u>11-23-92</u> Elevauons (DF, RKB, RT, GR, etc.)	12-13-92	6390'	6343'	
3073.4' GR	Name of Producing Formation Delaware	Top Oil/Gas Pay	Tubing Depth	
Perforations	Delaware	<u>5930'</u>	Depth Casing Shoe	
5930'-5980'			6390'	
HOLE SIZE	TUBING, CASING AND (CASING & TUBING SIZE			
12-1/4"	8-5/8"	<u>DEPTH SET</u> 410'	SACKS CEMENT	
7-7/8"	5-1/2"	6390'	$\frac{230 \text{ sx}}{1780 \text{ sx} \text{ C1} \text{ C} + 35/65 \text{ PC}}$	
			in 2 stages	
V. TEST DATA AND REQUE	2-7/8"	5690'		
OIL WELL (Test must be after	recovery of total volume of load oil and must	be equal to or exceed top allowab	le for this depth or be for full 24 hours.)	
Date First New Oil Run To Tank	Due of Tea	Producing Method (Flow, pump,	gas lýt, etc.)	
12-13-92 Leogth of Test	12-19-92 Tubing Pressure	Flowing Casing Pressure	Choke Size	
24 hours	1000	pkr	19/64"	
Actual Prod. During Test	Oil - Bbls.	Water - Bbla	Gu- MCF	
	147	85	1376	
GAS WELL Actual Prod. Test - MCF/D	Length of Test	Bbis Condensate/MMCF		
		Boir Concentric Minic P	Gravity of Condensate Port ID-	
Tesung Method (puol, back pr.)	Tubing Pressure (Shui-in)	Casing Pressure (Shui-in)	5-14-93 Choke Size Comp & 131	
		l		
VI. OPERATOR CERTIFIC				
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above		OIL CONSERVATION DIVISION		
is true and complete to the best of my	y knowledge and belief.	Date Approved	APR 3 0 1993	
Ann Mal	'illou al			
Signature		ByORIGINALISIGNED BY		
Terry McCullough,	ry McCullough, Sr. Production Clerk		MIKE WILLIAMS	
Printed Name 4/30/93	Title			
Date	<u>915/687-3551</u> Telephone No.			

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.