ubmit 5 Copies
ppropriate District Office
ISTRICT I
.O. Box 1980, Hobbs, NM 88240

ISTRICT II
.O. Drawer DD, Artesia, NM 88210

ISTRICT III
000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

RECEIVED

OIL CONSERVATION DIVISION

JUN 02 '89

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

ARTESIA, OFFICE

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

Santa Fe		✓
File		✓
Transporter	Oil	
	Gas	
Operator		✓

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

perator
Calvin F. Tennison & Alma F. Tennison

Well API No.
30-015-10181

ddress
P.O. Box 2232, Midland, Texas 79702

eason(s) for Filing (*Check proper box*)

lew Well [ ]
ecompletion [ ]
hange in Operator [X]
change of operator give name
d address of previous operator Calvin F. Tennison

Change in Transporter of:
Oil [ ] Dry Gas [ ]
Casinghead Gas [ ] Condensate [ ]

Other (*Please explain*) [ ]

. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No	Pool Name, Including Formation	Kind of Lease	Lease No.
Superior State	2	Corral Canyon Delaware	State, Federal or Fee XXXXXXX	B-10678

ocation
Unit Letter I : 1980 Feet From The S Line and 660 Feet From The E Line

Section 8 Township 25 Range 30 , NMPM, Eddy County

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

lame of Authorized Transporter of Oil [X] or Condensate
Permian Corp. SCURLOCK PERMIAN CORP EFF 9-1-91

Address (*Give address to which approved copy of this form is to be sent*)
P.O. Box 1183, Houston, Texas 77251

lame of Authorized Transporter of Casinghead Gas [X] or Dry Gas [ ]
Conoco

Address (*Give address to which approved copy of this form is to be sent*)
P.O. Box 2197, Houston, Texas 77252

well produces oil or liquids, ve location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When ?
	H	8	25	30	yes	3-17-88

this production is commingled with that from any other lease or pool, give commingling order number:

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v

Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
levations (*DF, RKB, RT, GR, etc.*)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
erforations			Depth Casing Shoe

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
			Post ID-3 6-9-89 chg op name

. TEST DATA AND REQUEST FOR ALLOWABLE

IL 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.*)	
ength of Test	Tubing Pressure	Casing Pressure	Choke Size
ctual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

GAS WELL

ctual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
esting Method (*pitot, back pr.*)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

ERTIFICATE OF COMPLIANCE

ereby certify that the rules and regulations of the Oil Conservation vision have been complied with and that the information given ve is true and complete to the best of my knowledge and belief.

Brenda Coffman
(Signature)

Brenda Coffman, Agent
(Title)

May 3, 1989
(Date)

OIL CONSERVATION DIVISION

Date Approved JUN 05 1989

By ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

Title

ote: 1104
be accompanied by tabulation of deviation tests taken in accordance