

OIL CONSERVATION DIVISION

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

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

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator MW Petroleum Corporation		Well API No. 30-015-23709-00
Address 2000 Post Oak Blvd., Suite 100, Houston, Texas 77056-4400		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input checked="" 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 State MA Com	Well No. 1	Pool Name, including Formation Willow Lake (Bone Springs)	Kind of Lease State, Federal or Fee	Lease No. L-5367
Location				
Unit Letter H	1980	Feet From The North	Line and 660	Feet From The East
Section 3	Township 25-S	Range 28-E	NMPM, Eddy	County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Scurlock Permian	or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 4648, Houston, Tx 77210-4648				
Name of Authorized Transporter of Casinghead Gas American Processing	or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 333 Clay, Ste 2000, Houston, Tx 77002				
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 3	Twp. 25S	Rge. 28E	Is gas actually connected?	When?

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 X	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v X
Date Spudded 2-19-92	Date Compl. Ready to Prod. 3-1-92	Total Depth 13623		P.B.T.D. 12900				
Elevations (DF, RKB, RT, GR, etc.) 2997.9' GL	Name of Producing Formation Willow Lake (Bone Springs)		Top Oil/Gas Pay 7300'		Tubing Depth 12900			
Perforations 7287' - 306' : 7310' - 17' : 7405' - 18' w/2 SPF					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT Est ID-2 8-7-92 NMPM BS P-1A A70
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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 6/30/92	Producing Method (Flow, pump, gas lift, etc.) pump	
Length of Test 24 Hrs.	Tubing Pressure 450	Casing Pressure 20	Choke Size
Actual Prod. During Test 1.39	Oil - Bbls. 0	Water - Bbls. 69.65	Gas- MCF 0

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

Vicki U Mosley
Signature
Vicki U Mosley Engr. Tech.
Printed Name
July 24, 1992 713-296-6240
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUL 30 1992

By ORIGINAL SIGNED BY
MIKE WILLIAMS
Title SUPERVISOR, DISTRICT I

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.