

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

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JAN 13 '88

Form C-104
Revised 10-01-78
Format 06-01-83
Page 1

O. C. D.
ARTESIA OFFICE

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Bettis, Boyle & Stovall ✓

Address
P.O. Box 1240, Graham, TX 76046

Reason(s) for filing (Check proper box)

<input checked="" type="checkbox"/> New Well	Change in Transporter of:	
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

Other (Please explain)

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Pickett Draw Federal	Well No. -1-	Pool Name, including Formation Wildcat - Morrow	Kind of Lease State, Federal or Fee Federal	Lease No. NM 15303
Location				
Unit Letter <u>C</u> : <u>660</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>West</u>				
Line of Section <u>9</u> Township <u>25S</u> Range <u>29E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> N/A	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1492, El Paso, TX 79978
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Hgt.
Is gas actually connected?	When
yes	Jan. 11 1988

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Kim Ligon

Kim Ligon, Production Assistant

January 11, 1988

(Signature)

(Title)

(Date)

OIL CONSERVATION DIVISION

FEB 24 1988

APPROVED _____, 1988

Original Signed By

BY John Williams

TITLE Oil & Gas Inspector

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
			XX	X					
Date Spudded 07/09/87	Date Compl. Ready to Prod. 01/06/88		Total Depth 13,930				P.B.T.D. 13,785		
Elevations (DF, RKB, RT, CR, etc.) 2944.8 GR	Name of Producing Formation Morrow		Top Oil/Gas Pay 13,206'				Tubing Depth 13,085		
Perforations See below							Depth Casing Shoe 13,930		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
26"	20"	625'	1335 sx.
17 1/2"	13 3/8"	2900'	2300 sx.
12 1/4"	9 5/8"	10,100'	1125 sx.
12 1/4"	7 5/8" liner	9845-12,656'	820 sx.

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed idp allowable for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	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 190	Length of Test 12 hrs.	Bbls. Condensate/MCF TSTM	Gravity of Condensate TSTM
Testing Method (pilot, back pr.) back pressure	Tubing Pressure (Shot-in) 5820	Casing Pressure (Shot-in) 0	Choke Size 8/64"

perforations - 13206 - 13210' (1JSPF), 13226 - 13238 (2JSPF), 13244 - 13252 (4JSPF), 13256 - 13266 (2JSPF), 13272 - 13273 (1JSPF), 13278-13279 (1JSPF), 13292 - 13304 (1JSPF), 13322 - 13323 (1JSPF), 13346 - 13349 (4JSPF), 13355-13360 (1 JSPF), 13364 - 13370 (1JSPF), 13382 - 13383 (1JSPF), 13396 - 13410 (4JSPF).

Tubing, Casing and Cementing Record, Cont. -
5 1/2" liner from 12602-13930 cemented with 200 sx.
2 7/8" tubing set at 13,085'