

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 19 '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

Operator Ralph E. Williamson ✓	
Address PO Box 994; Midland, TX 79702	
Reason(s) for filing (Check proper box)	Other (Please explain)
☒ New Well ☐ Recompletion ☐ Change in Ownership	Change in Transporter of: ☐ Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Stateline Federal	Well No. 2	Pool Name, including Formation Brushy Draw Delaware	Kind of Lease State, Federal or Fee Federal	Lease No. NM-54998
Location				
Unit Letter <u>E</u> : <u>610</u> Feet From The <u>South</u> Line and <u>990</u> Feet From The <u>West</u>				
Line of Section <u>35</u> Township <u>26S</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 ☒ or Condensate ☐	Address (Give address to which approved copy of this form is to be sent)
Navajo Refining	PO Box 159; Artesia, NM 88211-0159 <i>Post TD-2</i>
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)
Conoco, Inc.	PO Box 1959; Midland, TX 79702 <i>2-5-88 Comp & B1</i>
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	D 35 26S 29E Yes 1-12-88

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

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.

Mary Huber
(Signature)
Production
(Title)
1-15-88
(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 29 1988, 19
BY Original Signed By
Mike 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.

COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Rest.	Diff. Rest.
		X							
Well Spudded 12-4-87	Date Compl. Ready to Prod. 1-12-88			Total Depth 5093'			P.B.T.D. 5053'		
Productions (B/L, R/L, K/L, GR, etc.) 2864.5 GR	Name of Producing Formation Delaware			Top Oil/Gas Pay 4910'			Tubing Depth 4796'		
Productions 22 holes of 0.41" diam. @ 4910, 11, 17, 21, 29, 31, 35, 46, 50, 59, 61, 65, 67, 68, 70, 72, 74.							Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
14 3/4"	12 3/4" 40# H-40 8rd	188'	65 sx Premium Plus w/1/4# flocc
11"	8 5/8" 28# & 24# K-55 STC 8rd	2750'	250sx. Prem.+w/2% CaCl ₂ 1/4# fl 700sx-Howcolite;900sxPrem+; 125sx.Prem.*
7 7/8"	5 1/2" 15.5# J-55 8rd STC	5092'	750sx.Prem+; 50/50 POZ, 6# salt 1/4# flocc

TEST DATA AND REQUEST FOR ALLOWABLE (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)

First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
1-7-88	1-12-88	Pumping	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
24 hrs.	50	50	full
Oil Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
	215	157	278

Well	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Tested			
Testing Method (Flow, back pr.)	Tubing Pressure (shut-in)	Casing Pressure (shut-in)	Choke Size