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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

RECEIVED

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

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

CONFIDENTIAL

Operator Southwest Royalties, Inc.	Well API No. 30-015-27310
Address P. O. Box 11390, Midland, Texas 79702	
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Change in Transporter of: Recompletion <input 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"/> Other (Please explain) <input type="checkbox"/> <u>6/1/93</u> <u>FROM</u> <u>THE OIL & GAS COMMISSION</u>	
If change of operator give name and address of previous operator _____	

II. DESCRIPTION OF WELL AND LEASE

Lease Name North Brushy Draw 35 Fed	Well No. 1	Pool Name, including Formation Wildcat (Delaware)	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter <u>G</u> : <u>1980'</u> Feet From The <u>North</u> Line and <u>1980'</u> Feet From The <u>East</u> Line Section <u>35</u> Township <u>25S</u> Range <u>29E</u> , <u>NMPM</u> Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Scurlock-Permian	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1183 Houston, Texas 77001				
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Conoco, Inc.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1959 Midland, Texas 79702				
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 35	Twp. 25E	Rge. 29E	Is gas actually connected? <input type="checkbox"/> No When? <u>NA</u>

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Drift Res'v
Date Spudded 2-18-93	Date Compl. Ready to Prod. 3-25-93		Total Depth 5821'		P.B.T.D. 5758'			
Elevations (DF, RKB, RT, GR, etc.) 3032' KB	Name of Producing Formation Getty (Delaware)		Top Oil/Gas Pay 5535'		Tubing Depth 5529'			
Perforations 5583-5656' (29 perfs)					Depth Casing Shoe 5820'			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17-1/2	13-3/8	600'	1025 sx circ to surf.
11	8-5/8	3141'	1900 sx TOC - 500'
7-7/8	5-1/2	5820'	700 sx TOC - 3895'

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 3-25-93	Date of Test 3-30-93	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure 50 psi	Casing Pressure 50 psi	Choke Size NA
Actual Prod. During Test 375	Oil - Bbls. 136	Water - Bbls. 239	Gas - MCF 15

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.

Signature Doug Keathley Engineer
Printed Name 3-30-93 Title 915-686-9927
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAR 31 1993

By [Signature]
Title SUPERVISOR, DISTRICT II

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.