State of New Mexico Energy, Minerals and Natural Resources Department

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

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

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

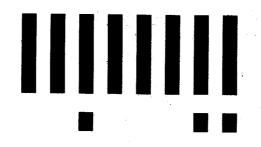
REQUEST FOR ALLOWABLE AND AUTHORIZATION

O. C. D.

I.		OTRA	INSP	ORT OIL	- AND NA	TURAL G.	AS			
Operator Bettis, Boyle & Stovall				Well API No. 30-015-23977						
Address P.O. Box 1240, G		TX 76	5450		817-549	- 0780				
Reason(s) for Filing (Check proper box)						er (Please expl	lain)			
New Well E re-en	try	Change in	Transr	orter of:			is requ	astad +	<u> </u>	<u>~</u> +
Recompletion	Oil		Dry G		fra	c +anl	30000	200 1	Clear	out
Change in Operator	Casinghead		Conde		liai haa	Lamk -	approx	. 800 00	015.011	_01
If change of operator give name	Casingnead	Gas	Conde	ensate	han	<u>a</u>				
and address of previous operator	4 N/D 7 T/4	77		#- 1	\ /	1./	_			
II. DESCRIPTION OF WELL			ar.	Worl !	waw p	elaw	vre.	- Fod		
Lease Name Sotol Federal Well No. Pool Name, Including Sotol Federal -2- — Delaware			_			d of Lease Fed. Lease No. X, Federal of Fee NM-69369				
Location	100	^				-			I	
Unit LetterK	. 1980	<u> </u>	Feet F	rom The 🚅	South Line	and19	80 Fe	et From The	West	Line
Section 1 Township	245		Range	31E	NI	мрм,	Eddy			County
III. DESIGNATION OF TRAN		OF O				vii ivi,	Luuy			County
Name of Authorized Transporter of Oil		or Conden		TO NATU		e address 10 w	hich approved	copy of this f	orm is to be s	ent)
Pride Pipeline Company	البيار				1					,
Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)							ent)			
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge.	Is gas actually	y connected?	When	7		
give location of tanks.	K	1	24		lNC		i			
If this production is commingled with that f IV. COMPLETION DATA	rom any othe	r lease or	pool, gi	ive comming	ing order numb				· - · · · · · · · · · · · · · · · · · ·	
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	Peady to	Prod		1		1		<u> </u>	
05/17/92		08/92	i iou.		TD - C O	re-enter	red to a	P.B.T.D.	8	3575'
Elevations (DF, RKB, RT, GR, etc.)	Name of Pro				Top Oil/Gas I	<u> </u>	rig. TD			
3532' GR	,	_		ц	1	-		Tubing Dept		
Perforations	De	lawar	<u>e</u>		8300' 8 516'					
8300-8325', 2 SPF, 50	holes							Depth Casin	g Shoe	
		JBING.	CASI	NG AND	CEMENTIN	VG RECOR	ID.	<u>!</u>	··· · · · · · · · · · · · · · · · · ·	
HOLE SIZE		ING & TL				DEPTH SET		5	SACKS CEM	FNT
26"	20"		, 5,,10	<u> </u>	688'	DET THE DET			77	110-2
-17 1/2"	13 37	8"			4538'					
12 1/4"	9 5/8				12,250'			3880 SX 8-7-92		
· ,	5 1/2		. n					2220 SX comp & B. K		
V. TEST DATA AND REQUES				TDC	<u> 15,600</u> - 2 3/8"		55461	l <u>. 1550</u>	- SX	
OIL WELL (Test must be after re						set @	5516' owable for this	denth or he t	for full 24 hou	ore)
Date First New Oil Run To Tank	Date of Test			04 0/22 //125.			ump, gas lift, e		0/ /11/ 2/ //01	7.5.7
06/06/92		15/92			l .	•		,		
Length of Test	Tubing Press				Casing Pressu			Choke Size		
24 hrs.	-					10		OHOND BILL		
Actual Prod. During Test	Oil - Bbls.	50			300 Water - Bbls.			Gas- MCF	/ / 	
Actual Float During Feet	On - Bois.	80			130			0		
GAS WELL	L					· · · · · · · · · · · · · · · · · · ·				
Actual Prod. Test - MCF/D	Length of Te	est			Bbls. Conden	sate/MMCF		Gravity of C	ondensate	
Festing Method (pitot, back pr.)	Tubing Press	sure (Shut-	-in)		Casing Pressu	re (Shut-in)		Choke Size		
VI OPEDATOR CERTIFIC	ATE OF	COL	T T A 3	VCE.	1			l		
VI. OPERATOR CERTIFICA				NCE		DIL CON	ISERV	I MOIT	חועופור)NI
I hereby certify that the rules and regulations of the Oil Conservation						NOLI I V	TION	אוטועוכו	714	
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				_	_		UL 2 4	1992		
	TOTAL MILE)			Date	Approve	d	U L & 4	5 	
1 Jun 41	gon					ODICINAL CICAGO DV				
Signature	()				By MIKE WILLIAMS					
Rim Ligon Production Analyst Printed Name Title				SUPERVISOR, DISTRICT IT						
06/16/92	8	17-54		80	Title				and the same of th	
Date			phone I			Ta	e compressed and a single space.	, i, i ki ar sy ar i iya i i ya bila a		
					44					

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.







Job separation sheet

OIL CONSERVATION DIVISION

DRAWER DD

ARTESIA NM

DISTRICT OFFICE II

	Januar	y thr	u June	1992
NO		2139	T/2	

DISTRICT SUPERVISOR

SUPPLEMENT TO THE OIL PRORATION SCHEDULE

DATE	June 19, 1992		
PURPOSE.	ALLOWA	BLE ASSIGNMENT - TESTING	
	Effective June 1, 1992 a	testing allowable of 800	barrels of oil is
	hereby assigned to Betti	s, Boyle & Stovall, Sotol	Federal #2-K-1-24-31
	in the Wildcat Delaware	Pool for the monthof June	1992.
			:
	MW/mm		
	Bettis, Boyle & Stovall		
	PPC		
		OIL CONS	ERVATION DIVISION
		ma'l.	

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