

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

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

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

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

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

I.

Operator V-F PETROLEUM INC.	Well API No. 30-025-28440
Address ONE MARIENFELD PLACE, STE 580 MIDLAND, TX 79701	
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"/>
THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.	
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name UNCLE SAM 25 FEDERAL COM	Well No. 1	Pool Name, Including Formation CORBIN WOLFCAMP, SOUTH	Kind of Lease FED State, Federal or Fee	Lease No. 45225
Location Unit Letter <u>L</u> : 1980 Feet From The <u>SOUTH</u> Line and <u>660</u> Feet From The <u>WEST</u> Line Section <u>25</u> Township <u>18S</u> Range <u>32E</u> , NMPM, LEA 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"/>	Address (Give address to which approved copy of this form is to be sent)
LANTERN PETROLEUM CORP	P.O. BOX 2281 MIDLAND, TX 79702
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
GPM GAS CORP.	588 FRANK PHILLIPS BLDG., BARTLESVILLE OK 74004
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When ?
	L 25 18S 32E YES 1986

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	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
	X			X				X
Date Spudded 12/3/83	Date Compl. Ready to Prod. 10/15/93	Total Depth 13,750'	P.B.T.D. 10,952'					
Elevations (DF, RKB, RT, GR, etc.) 3754' GR	Name of Producing Formation WOLFCAMP	Top Oil/Gas Pay 10,908'	Tubing Depth 8100'					
Perforations 10,908' - 10,938'		Depth Casing Shoe						
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET			SACKS CEMENT			
17 1/2	13 3/8	492'			550 C1 "C"			
11	8 5/8	4539'			1320 lite			
7 7/8	5 1/2	13747'			500 C1 "H"			

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 10/16/93	Date of Test 10/22/93	Producing Method (Flow, pump, gas lift, etc.) PUMPING	
Length of Test 24 HRS	Tubing Pressure -----	Casing Pressure -----	Choke Size -----
Actual Prod. During Test	Oil - Bbls. 55	Water - Bbls. 22	Gas- MCF 44

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.

Kenneth E. Stull
Signature
KENNETH E. STULL ENG. TECH.
Printed Name
10/25/93 Date
915/683-3344 Telephone No.

OIL CONSERVATION DIVISION

Date Approved OCT 27 1993

By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

Title _____

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.