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REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GASOperator
Berge Exploration, Inc.Address
7100 N. Broadway, Ste. 2-L, Denver, CO 80221

Reason(s) for filing (Check proper box)

New Well ☒Recompletion ☐Change in Ownership ☐

Change in Transporter of:

Oil ☐Casinghead Gas ☐Dry Gas ☐Condensate ☐

Other (Please explain)

CASINGHEAD GAS MUST NOT BE
FLARED AFTER 30 DAYS
UNDER ANY CIRCUMSTANCES
IS IT APPROVEDIf change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Lease Name Worley-Federal	Well No. 2	Pool Name, Including Formation Leslie Spring, San Andres	Kind of Lease State, Federal or Fee Federal	Lease No. NM-43714
Location Unit Letter <u>K</u> : <u>330</u> Feet From The <u>West</u> Line and <u>1650</u> Feet From The <u>South</u> Line of Section <u>25</u> Township <u>7 South</u> Range <u>26 East</u> , NMPM, <u>Chaves</u> County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Navajo Crude Oil	Address (Give address to which approved copy of this form is to be sent) P. O. Drawer 175, Artesia, NM 88210					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 26	Twp. 7S	Rge. 26E	Is gas actually connected?	When

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well ☒	Gas Well	New Well ☒	Workover	Deepen	Plug Back	Same Res'tv.	Diff. Res'tv.
Date Spudded 6/22/82	Date Compl. Ready to Prod. 10/9/82	Total Depth 2063	P.B.T.D. 2040					
Elevations (DF, RAB, RT, CR, etc.) 3853.6 GL	Name of Producing Formation San Andres	Top Oil/Gas Pay 1528	Tubing Depth 1791					
Perforations Perf w/2 SPF @ 1528, 1533, 1538.5, 1543, 1550, 1554, 1557, 1559, 1561.5, 1566, 1569, 1573, 1729, 1732, 1736, 1739, 1763, 1766, 1770, 1773, 1782.5, 42 holes @ .40"		Depth Casing Shoe 2062						
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET		SACKS CEMENT				
12 1/4"	8 5/8"	201.74		156 sx, circ. 8 sx				
6 3/4"	4 1/2"	2062		240 sx				

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 Tanks 8/7/82	Date of Test 10/9/82	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure N/A	Casing Pressure N/A	Choke Size N/A
Actual Prod. During Test 3.69	Oil - Bbls. 0.28	Water - Bbls. 3.41	Gas - MCF N/A

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

Holly L. Morris
(Signature)Geologist
(Title)Nov. 11, 1982
(Date)

OIL CONSERVATION DIVISION

APPROVED DEC 9 3 1982, 19

BY Original Signed By
Leslie A. Clements
TITLE Supervisor District II

This form is to be filed in compliance with RULE 1101.

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 conditions.

Separate Form C-104 must be filed for each pool in multiple completed wells.