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TRANSPORTER	OIL	
	GAS	
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**NEW MEXICO OIL CONSERVATION COMMISSION**  
**REQUEST FOR ALLOWABLE**  
**AND**  
**AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS**

Form C-104  
 Superseding Old C-104 and  
 Effective 1-1-65

**RECEIVED**

**AUG 9 1982**

**O. C. D.**

**ARTESIA, OFFICE**

Operator  
**UMEX, Inc.**

Address

**P.O. Drawer 1517**

**Roswell, New Mexico 88201**

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)

If change of ownership give name  
 and address of previous owner

**DESCRIPTION OF WELL AND LEASE**

Lease Name <b>Cannon Fee</b>	Well No. <b>3</b>	Pool Name, Including Formation <b>W. Bitter Lakes, San Andres</b>	Kind of Lease <b>Fee</b>	Lease No.
Location				
Unit Letter <b>H</b>	<b>1650</b>	Feet From The <b>North</b>	<b>356</b>	Feet From The <b>East</b>
Line of Section <b>17</b>	Township <b>10S</b>	Range <b>25E</b>	<b>Chaves</b> , NMPM, County	

**DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <b>Navajo Crude Oil Purchasing Co.</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. Drawer 159, Artesia, NM 88102</b>
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 <b>A</b> Sec. <b>17</b> Twp. <b>10</b> Rge. <b>25</b>
Is gas actually connected?	<b>No</b> 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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded <b>3-26-82</b>	Date Compl. Ready to Prod. <b>6-12-82</b>	Total Depth <b>891'</b>	P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.) <b>3522 GR</b>	Name of Producing Formation <b>San Andres</b>	Top Oil/Gas Pay <b>731'</b>	Tubing Depth <b>865'</b>					
Perforations <b>Open hole 731-891'</b>	Depth Casing Shoe <b>731'</b>							

**TUBING, CASING, AND CEMENTING RECORD**

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
<b>12 1/4"</b>	<b>8 5/8" csq.</b>	<b>644.07'</b>	<b>240 sks. Class C2% CALT</b>
<b>7 7/8"</b>	<b>4 1/2" csq.</b>	<b>731'</b>	<b>100 sks. 50-50 POS (circ.)</b>
	<b>2 3/8" tbq.</b>	<b>865'</b>	<b>150 sks. Class C, 2% CALT (circ.)</b>

**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 <b>6-12-82</b>	Date of Test <b>6-11-82</b>	Producing Method (Flow, pump, gas lift, etc.) <b>Pump- 1 1/2 x 8' Traveling BBL</b>	
Length of Test <b>24 hr.</b>	Tubing Pressure <b>-0-</b>	Casing Pressure <b>-0-</b>	Choke Size <b>-0-</b>
Actual Prod. During Test <b>1/8 BBL.</b>	Oil-Bbls. <b>1/8 BBL.</b>	Water-Bbls. <b>1</b>	Gas-MCF <b>NSA</b>

**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

**CERTIFICATE OF COMPLIANCE**

hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

*Anita Fish*  
 (Signature)

**Secretary**  
 (Title)

**August 2, 1982**  
 (Date)

**OIL CONSERVATION COMMISSION**

**APPROVED AUG 9 1982**

BY *W.A. Gressitt* 19

TITLE **SUPERVISOR, DISTRICT II**

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.