Submit 5 Copies Appropriate District Office DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

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

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

OIL CONSERVATION DIVISION P.O. Box 2088

JEN 24 30

Santa Fe, New Mexico 87504-2088 DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION J. D. TO TRANSPORT OIL AND NATURAL GAS ...SIA, OF Operator Vell API No. Samedan oil Corporation 🗸 30-005-62722 Midland, Texas #10 Desta Drive, Suite 240 East Reason(s) for Filing (Check proper box) Other (Please explain) New Well X Change in Transporter of Dry Gas Recompletion Oil Change in Operator Condensate If change of operator give name and address of previous operator II. DESCRIPTION OF WELL AND LEASE en liter Well No. Pool Name, Including Formation Kind of Lease Lease No. State "25" Com State, Federal or Fee Wildcat Montova State Location 660 1980 Feet From The South Line and Unit Letter Feet From The West Line 10-S 25 Township 26-E Chaves Range NMPM. III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Address (Give address to which approved copy of this form is to be sent) or Condensate Name of Authorized Transporter of Casinghead Gas or Dry Gas 🔀 Address (Give address to which approved copy of this form is to be sent) Transwestern If well produces oil or liquids, Unit Sec. Twp. Is gas actually connected? Rge. When ? give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well New Well Workover Deepen Plug Back Same Res'v Diff Res'v Designate Type of Completion - (X) X Total Depth Date Spudded Date Compl. Ready to Prod. P.B.T.D. 66351 10-5-89 11-11-89 Elevations (DF, RKB, RT, GR, etc.) Top Oil/Gas Pay Name of Producing Formation Tubing Depth 3697.4 GR 6150 5963 Montoya Depth Casing Shoe 6158-6177 TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE **DEPTH SET** SACKS CEMENT 8 5/8" 24# 1162 700 sx 5 1/2" 15.50# 670 sx <u> 6635</u> lst stage 3<u>40 sx</u> DV @ 2398 2nd stage V. TEST DATA AND REQUEST FOR ALLOWABLE (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 Producing Method (Flow, pump, gas lift, etc.) Date of Test Length of Test Choke Size Casing Pressure **Tubing Pressure** Actual Prod. During Test Water - Bbls. Gas- MCF Oil - Bbls. **GAS WELL** Actual Prod. Test - MCF/D Bbis. Condensate/MMCF Length of Test Gravity of Condensate 24 hrs 571 0 Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size Testing Method (pitot, back pr.) 2045 Flowing VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above Date Approved MAR APR 2 3 1901 is true and complete to the best of my knowledge and belief.

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Vertis Diamond Division Production Clerk

Signature

Printed Name

-19-90

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

By_

Title.

ORIGINAL SIGNED BY

SUPERVISOR, DISTRICT IT

MIKE WILLIAMS

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Telephone No.

- 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.

(915) 684-8491

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