

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

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator TOPAT OIL CORPORATION	Well API No.
Address 505 N BIG SPRING, SUITE 204, MIDLAND, TEXAS 79701	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input 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"/>
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name PATRICIA FEDERAL	Well No. 1	Pool Name, Including Formation COYOTE (QUEEN)	Kind of Lease State, Federal or Foreign	Lease No. NM 58803
Location Unit Letter <u>K</u> : <u>990</u> Feet From The <u>WEST</u> Line and <u>2310</u> Feet From The <u>SOUTH</u> Line Section <u>20</u> Township <u>11S</u> Range <u>27E</u> , <u>NMPM</u> , <u>CHAVES</u> 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"/> MARATHON OIL CORP.	Address (Give address to which approved copy of this form is to be sent) P O BOX 552, MIDLAND, TEXAS 79702					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> NONE	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	Sec.	Twp.	Rge.	Is gas actually connected?	When ?
		20	11S	27E	NO	

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 7/31/92	Date Compl. Ready to Prod. 10/3/92		Total Depth 857		P.B.T.D. 841			
Elevations (DF, RKB, RT, GR, etc.) 3689 GL	Name of Producing Formation QUEEN		Top Oil/Gas Pay 740		Tubing Depth 721			
Perforations 740-819 (16 HOLES)					Depth Casing Shoe 851			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/2	8 5/8 24#		336		225 SX CL "C"			
6 1/2	4 1/2 10.5#		850		215 SX CL "C"			

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.)		Producing Method (Flow, pump, gas lift, etc.)	
Date First New Oil Run To Tank 10/10/92	Date of Test 10/10/92	PUMP	
Length of Test 24 HOURS	Tubing Pressure -0-	Casing Pressure NEG	Choke Size NONE
Actual Prod. During Test 76 BO	Oil - Bbls. 76 BO	Water - Bbls. 130 BW	Gas - MCF UNMEASURED

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.

Signature  
THOMAS SCHNEIDER OPERATOR REPRESENTATIVE  
Printed Name  
DECEMBER 3, 1993 (915) 682-6340  
Date Telephone No.

OIL CONSERVATION DIVISION

DEC 2 2 1993

Date Approved

By

Title

SUPERVISOR, DISTRICT II

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.