

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

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Pool Oil Company ✓	SEP 13 1991	Well API No. 30-015-26727
Address P.O. Box 604, Roswell, NM 88202		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Other (Please explain) Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> CASINGHEAD GAS MUST NOT BE Change in Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> FLARED AFTER 11/12/91 UNLESS AN EXCEPTION TO: RULE 306 IS OBTAINED		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hannifin State	Well No. 1	Pool Name, Including Formation Millman Q GB SA	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter L : 330 Feet From The West Line and 1650 Feet From The South Line Section 17 Township 19S Range 29E, NMPM, Eddy 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"/> Navajo Refining Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 159, Artesia, NM 88210					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) 1625 W. Marland, Hobbs, NM 88240					
If well produces oil or liquids, give location of tanks.	Unit L	Sec. 17	Twp. 19S	Rge. 29E	Is gas actually connected? NO	When?

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) X	Oil Well X	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 5/15/91	Date Compl. Ready to Prod. 9/5/91	Total Depth 2112'	P.B.T.D. 2100'					
Elevations (DF, RKB, RT, GR, etc.) 3372 GR	Name of Producing Formation Queen	Top Oil/Gas Pay 1988'	Tubing Depth 1901'					
Perforations 1988 - 2080			Depth Casing Shoe 2112'					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 12"	CASING & TUBING SIZE 8 5/8"		DEPTH SET 250'		SACKS CEMENT 200			
6"	4 1/2"		2112'		250			
Post ID-2 10-4-91 comp & B/R								

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 9/5/91	Date of Test 9/9/91	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs.	Tubing Pressure Atmos.	Casing Pressure 15	Choke Size None
Actual Prod. During Test	Oil - Bbls. 25	Water - Bbls. 105	Gas - MCF 25

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
Fred F. Pool, III Owner
Printed Name
Sept. 9, 1991
Date
Title
505 622-4859
Telephone No.

OIL CONSERVATION DIVISION

Date Approved SEP 24 1991

By ORIGINAL SIGNED BY
MIKE WILLIAMS
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.
- 3) Fill out only Sections I, II, III, and VI for recompleted wells.