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State of New Mexico Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

OOO Rio Brazos Rd., Aztec, NM 87410	REQUEST FOR ALLOWAE	SLE AND AUTHORIZATION		
.	TO TRANSPORT OIL	LAND NATURAL GAS	Pl No.	
Operator OXY USA Inc.			30-015-21242	
P.O. Box 50250	Midland, TX. 79710			
Reason(s) for Filing (Check proper box)		X Other (Please explain)		
New Well	Change in Transporter of:	Trident NGL sold the		
Kecombienos 😕	01 = 10,000 =	Plant to Amoco Prod	. Co.	
Change in Operator	Casinghead Gas Condensate			
f change of operator give name and address of previous operator				
I. DESCRIPTION OF WELL A	ND LEASE Well No. Pool Name, Include		of Lease No.	
Government Z	Com 1 Burton	Flat Morrow	Federal or Fee SRM 1340	
Location			1.10st	
Unit Letter			tet From The West Line	
Section 23 Township	205 Range 20	8E, NMPM, Ede	2 County	
III. DESIGNATION OF TRANS	SPORTER OF OIL AND NATU	URAL GAS Address (Give address to which approved	l copy of this form is to be sent)	
Name of Authorized Transporter of Oil	me of Authorized Transporter of Oil or Concentate		P.O. Box 1183 Houston, TX, 77210	
Scurlock Permian Corp. Name of Authorized Transporter of Casingh	head Gas Or Dry Gas [X]	Address (Give address to which approved copy of this form is to be sent)		
Amoco Production Co.		P.O. Box 21198 Tulsa		
If well produces oil or liquids,	Unit Sec. Twp. Rge	1 -	1.7	
nive location of tanks.	16 23 20 25			
If this production is commingled with that fr	rom any other lease or poor, give constant			
IV. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v Diff Res'v	
Designate Type of Completion -	· (X)		P.B.T.D.	
Date Spudded	Date Compi. Ready to Prod.	Total Depth	P.B.1.D.	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Perforations			Depth Casing Shoe	
	- CONTRACTOR AND	D CENTRAL PECOPD		
	TUBING, CASING ANI	D CEMENTING RECORD DEPTH SET	SACKS CEMENT	
HOLE SIZE	CASING & TUBING SIZE			
	1		I .	
V. TEST DATA AND REQUES	T FOR ALLOWABLE	the seal to an exceed top allowable for the	his depth or be for full 24 hours.)	
V. TEST DATA AND REQUES OIL WELL (Test must be after re	ecovery of total volume of toda ou and m	ust be equal to or exceed top allowable for ti	his depth or be for full 24 hours.)	
V. TEST DATA AND REQUES OIL WELL (Test must be after re	ST FOR ALLOWABLE recovery of total volume of load oil and mu Date of Test	Producing Medica (1 1011) Party 8		
OIL WELL (Test must be after re	ecovery of total volume of toda ou and m	Producing Method (Flow, pump, gas lift. Casing Pressure	Choke Size	
OIL WELL (Test must be after re Date First New Oil Run To Tank	Date of Test	Producing Medica (1 1011) Party 8		
OIL WELL (Test must be after re Date First New Oil Run To Tank Length of Test Actual Prod. During Test	Date of Test Tubing Pressure	Casing Pressure	Choke Size	
OIL WELL (Test must be after re Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL	Date of Test Tubing Pressure Oil - Bbls.	Casing Pressure	Choke Size	
OIL WELL (Test must be after re Date First New Oil Run To Tank Length of Test Actual Prod. During Test	Date of Test Tubing Pressure	Casing Pressure Water - Bbis. Bbis. Condensate/MMCF	Choke Size Gas- MCF Gravity of Condensate	
OIL WELL (Test must be after re Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL	Date of Test Tubing Pressure Oil - Bbls.	Casing Pressure Water - Bbis.	Choke Size Gas- MCF	
OIL WELL (Test must be after re Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D Testing Method (pitot, back pr.) VI. OPERATOR CERTIFIC I hereby certify that the rules and regular in have been compiled with and	Date of Test Tubing Pressure Oil - Bbls. Length of Test Tubing Pressure (Shut-in) CATE OF COMPLIANCE llations of the Oil Conservation in that the information given above	Casing Pressure Water - Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in) OIL CONSERY	Choke Size Gas-MCF Gravity of Condensate Choke Size VATION DIVISION	
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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 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.