

RECEIVED

State of New Mexico
Energy, Minerals and Natural Resources Department

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

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

JUN 12 '89

OIL CONSERVATION DIVISION

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

C. C. D.

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

ARTESIA, OFFICE

Santa Fe		
File		
Transporter	Oil	
	Gas	
Operator		

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator: Devon Energy Corporation (Nevada) ✓ Well API No. _____

Address: 1500 Mid America Tower, 20 North Broadway, Oklahoma City, Oklahoma 73102

Reason(s) for Filing (Check proper box): Other (Please explain) _____

New Well Change in Transporter of: _____ Operator Name Change

Recompletion Oil Dry Gas

Change in Operator Casinghead Gas Condensate

If change of operator give name and address of previous operator _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Todd "23" Federal	Well No. 3	Pool Name, including Formation Undesignated Sand - Dunes	Kind of Lease State, (Federal) or Fee	Lease No. NM-0405444
Location				
Unit Letter J	1980	Feet From The South	Line and 1800	Feet From The East
Section 23	Township 23S	Range 31E	County Eddy, NMPM	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Tesoro Crude Oil Company <input checked="" type="checkbox"/>	or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 8700 Tesoro Dr., San Antonio, Texas 78286				
Name of Authorized Transporter of Casinghead Gas Natural Gas Pipeline <input type="checkbox"/>	or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 283, Houston, Texas 77001				
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 23	Twp. 23S	Rge. 31E	Is gas actually connected? Yes	When? June 3, 1983

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	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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.) ✓

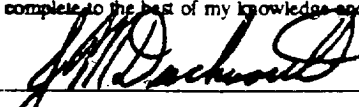
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

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: 

J. W. Duckworth, District Engineer

Printed Name: _____ Title: _____

Date: June 8, 1989 Telephone No.: (405) 235-3611

OIL CONSERVATION DIVISION

Date Approved: JUN 14 1989

By: _____ ORIGINAL SIGNED BY _____

Title: _____

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.