

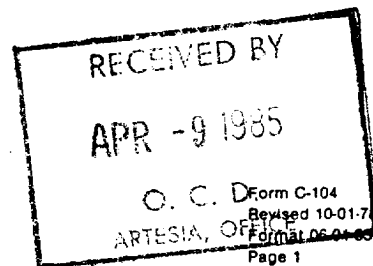
STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL	<input checked="" type="checkbox"/>
GAS	<input checked="" type="checkbox"/>
OPERATOR	<input checked="" type="checkbox"/>
PROMOTION OFFICE	<input type="checkbox"/>

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS



I.

Operator Maddox Energy Corporation ✓	
Address 1008 W. Pierce, Suite 2-A, Carlsbad, New Mexico 88220	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE R-7997 3/2/85

Lease Name Flower Draw Unit	Well No. 2	Pool Name, including Formation REL BLUFF Und. Delaware GAS	Kind of Lease State, Federal or Fee	Lease No. L-7017
Location Unit Letter <u>G</u> ; <u>1980</u> Feet From The <u>North</u> Line and <u>2110</u> Feet From The <u>East</u> Line of Section <u>2</u> Township <u>26-S</u> Range <u>28-E</u> , NMPM, <u>Eddy</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
The Permian Corporation	P. O. Box 1183, Houston, Texas 77001	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)	
El Paso Natural Gas Company	P. O. Box 1492, El Paso, Texas 79978	
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 2
	Twp. 26S	Rge. 28E
	Is gas actually connected?	When
	yes	4-5-85

If this production is commingled with that from any other lease or pool, give commingling order number: _____

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

Rebecca A. Hughes
(Signature)

Agent
(Title)

4-8-85
(Date)

OIL CONSERVATION DIVISION

APPROVED JUL 1 1985, 19

BY Original Signed By
Les A. Clements

TITLE Supervisor District II

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

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

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

IV. COMPLETION DATA

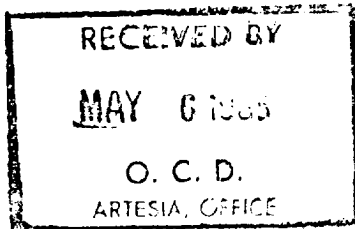
Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
			X	X					
Date Spudded 8/6/82	Date Compl. Ready to Prod. 8/28/82		Total Depth 3500'			P.B.T.D. 3235'			
Elevations (DF, RKB, RT, GR, etc.) 2955.3' GL	Name of Producing Formation Delaware		Top Oil/Gas Pay 3201' 2510'			Tubing Depth 3149'			
Perforations 3201' - 3219' - 4 spf - .40" holes - total 72 holes						Depth Casing Shoe 3469'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			
12-1/4"	8-5/8"		552'			375 SX			
7-7/8"	4-1/2"		3469'			1480 SX			
	2-3/8"		3149'						

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 Tanks	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 788	Length of Test 6 hrs.	Bbls. Condensate/MMCF 0	Gravity of Condensate N/A
Testing Method (pilot, back pr.) CAOF	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size 20/64



OIL CONSERVATION DIVISION
P. O. DRAWER DD
ARTESIA, NEW MEXICO 88210

DATE: May 2, 1985

NOTICE OF GAS CONNECTION

This is to notify the Oil Conservation Division that connection for the purchase of

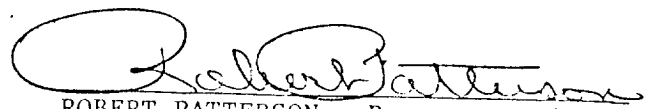
gas from the Maddox Energy Corporation ✓
OPERATOR

Flower Draw Unit #1 and #2, Eddy, 2-26-28
LEASE & WELL COUNTY UNIT S-T-R

Undesignated Delaware, El Paso Natural Gas Company
POOL NAME OF PURCHASER

was made on 4-4-85, 37104-1-01
DATE SITE CODE & SITE WELL NUMBER

EL PASO NATURAL GAS COMPANY
PURCHASER


ROBERT PATTERSON - Representative

Systems Dispatching Production
Coordinator, Title

c: Oil Conservation Division
State of New Mexico
P. O. Box 2088
Santa Fe, New Mexico 87501
Don Patton - Jal Measurement
Production Control - M/O
Gas Purchases - M/O
Operator
Earl Smith, Production - Jal
Charlie Annett - Midland
Joe Robinson - Jal
Eunice Field Lines
Jal Field Lines
Bill Cranford - Jal
Carl Frymire - Jal
File

NEW MEXICO OIL CONSERVATION COMMISSION
WELL LOCATION AND ACREAGE DEDICATION PLAT

RECEIVED

Form C-102
Supersedes C-128
Effective 1-1-65

JUL 29 1982

All distances must be from the outer boundaries of the Section

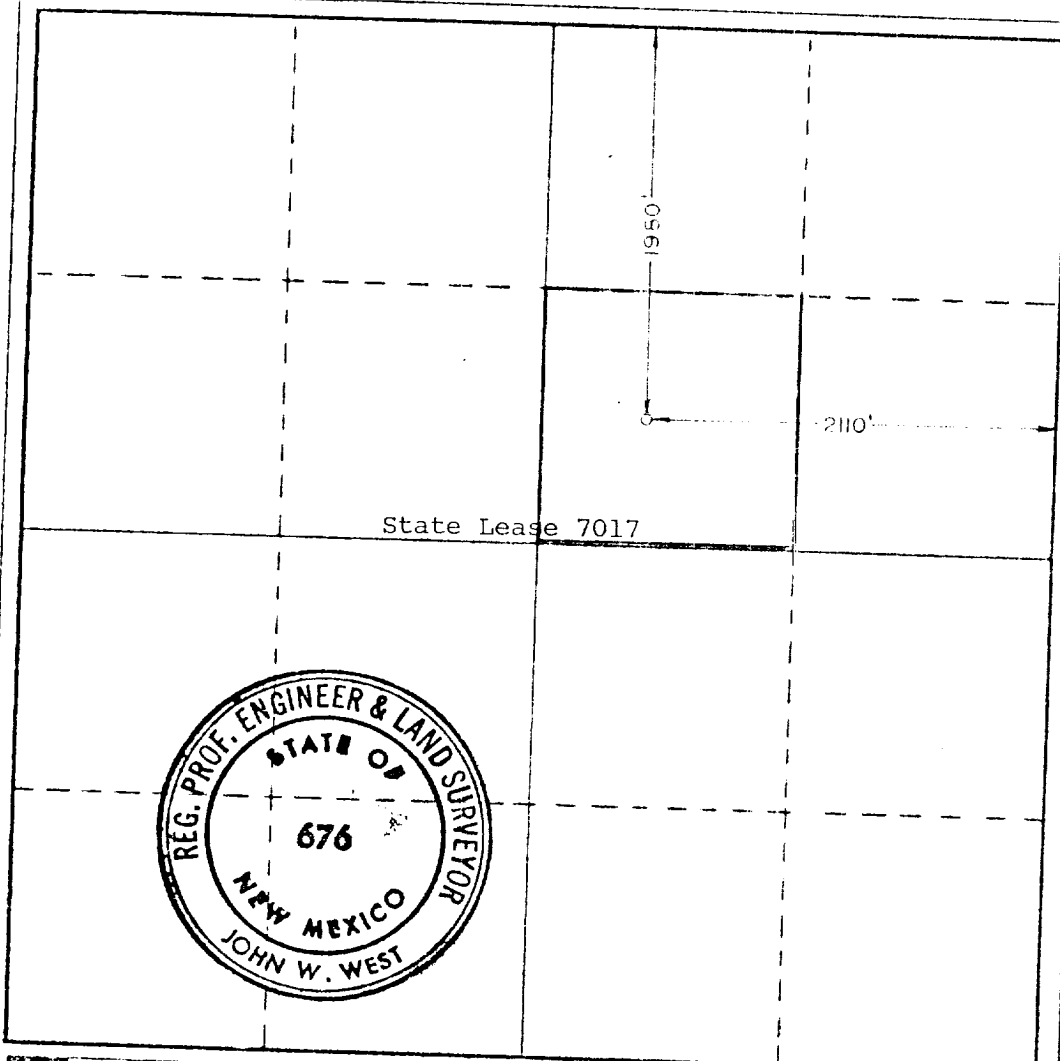
MADDOX ENERGY CORPORATION			FLOWER DRAW UNIT			O. C. D.		2	
Section	2	Range	26 SOUTH	County	ARTESIA, OFFICE				
Section	G	Range	28 EAST	County	EDDY				
Section	1980	Section	NORTH	Section	2110	Section	EAST		
Section	2955.3'	Section	Delaware	Section	Wildcat - Delaware	Section	160	Section	40

1. Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation _____

If answer is "no," list the owners and tract descriptions which have actually been consolidated (Use reverse side of this form if necessary) _____

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name

Carter Hughes

Position

Production Supervisor

Company

Maddox Energy Corporation

Date

7-28-82

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed

7-27-1982

Registered Professional Engineer and/or Land Surveyor

John W. West

Certificate No. JOHN W. WEST 676
PATRICK A. ROMERO RRR