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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.

<p align="center"><b>SUNDRY NOTICES AND REPORTS ON WELLS</b></p> <p align="center"><small>DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.</small></p>	
<p>1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-</p>	7. Unit Agreement Name
2. Name of Operator Tipperary Oil & Gas Corporation	8. Farm or Lease Name New Mexico "B"
3. Address of Operator 800 N. Marienfeld, Suite 100, Midland, Tx 79701	9. Well No. 1
4. Location of Well UNIT LETTER <u>B</u> <u>1980</u> FEET FROM THE <u>East</u> LINE AND <u>660</u> FEET FROM THE <u>North</u> LINE, SECTION <u>27</u> TOWNSHIP <u>10S</u> RANGE <u>32E</u> N.M.P.M.	10. Field and Pool, or Milucat Mescalero "Devonian"
11. Elevation (Show whether DF, RT, GR, etc.)	12. County LEA

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
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PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
		OTHER <u>Put back to producing</u> <input type="checkbox"/>	

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Turned on well 06/17/91. No work was needed.

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

SIGNED [Signature] TITLE Production Clerk DATE 04/03/92

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY [Signature] TITLE  DATE APR 07 92

CONDITIONS OF APPROVAL, IF ANY:

Submit 2 copies to Appropriate District Office.

DISTRICT I

P.O. Box 1960, 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-116  
Revised 1/1/89

GAS - OIL RATIO TEST

Operator		Tipperary Oil & Gas Corporation				Pool		Mescalero Devonian				County		LEA																			
Address		800 N. Marientfeld, Suite 100 Midland, TX 79701				TYPE OF TEST		Scheduled <input type="checkbox"/>		Completion <input type="checkbox"/>		Special <input checked="" type="checkbox"/>																					
LEASE NAME		WELL NO.		LOCATION				DATE OF TEST		STATUS		CHOKE SIZE		TBG. PRESS.		DAILY ALLOW-ABLE		LENGTH OF TEST HOURS		PROD. DURING TEST		GAS - OIL RATIO											
				U		S		T		R										WATER BBL.S		OIL GRAV. OIL BBL.S		GAS M.C.F.									
New Mexico "B"		1		1B		27		10S		32E		3/1/92		P		-		35				24		15		19.0		6		6		1000	

Instructions:

During gas-oil ratio test, each well shall be produced at a rate not exceeding the top unit allowable for the pool in which well is located by more than 25 percent. Operator is encouraged to take advantage of this 25 percent tolerance in order that well can be assigned increased allowables when authorized by the Division.

Gas volumes must be reported in MCF measured at a pressure base of 15.025 psia and a temperature of 60° F. Specific gravity base will be 0.60.

Report casing pressure in lieu of tubing pressure for any well producing through casing.

(See Rule 301, Rule 1116 & appropriate pool rules.)

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

Signature

Michelle Cook Production Clerk

Printed name and title

04/03/92 (915) 683-5203

Date Telephone No.