

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Rhombus Energy Co.	Well API No. 30-025-00063
Address 200 N. Loraine, Ste. 1270 Midland TX 79701	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> New Well <input type="checkbox"/> Completion <input checked="" type="checkbox"/> Change in Operator <input type="checkbox"/> Change in Transporter of: Oil <input type="checkbox"/> Dry Gas Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> Other (Please explain)	
Change of operator give name and address of previous operator Dakota Resources, Inc. 310 W. Wall Ste. 814, Midland TX 79701	

DESCRIPTION OF WELL AND LEASE				
Lease Name New Mexico State BR	Well No. 2	Pool Name, Including Formation Moore Devonian	Kind of Lease State, Federal or Private	Lease No. B-9596-3
Location Unit Letter K : 1980 Feet From The FSL Line and 1980 Feet From The FWH Line Section 25 24 Township 11S Range 32E, NMPM, Lea County				

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS							
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline				Address (Give address to which approved copy of this form is to be sent) Box 60028 San Angelo, TX 76906-0028			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum				Address (Give address to which approved copy of this form is to be sent) P.O. Box 1598 Tulsa, OK 74102-1589			
Well produces oil or liquids, or location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When ?	
			11	32	yes		

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

II. 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

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

I. 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 Gregory D. Cielinski	President
Printed Name 10-2-93	Title (915) 683-8873
Date	Telephone No.

OIL CONSERVATION DIVISION	
DEC 02 1993	
Date Approved	
By	
Title	Orig. Signed by Paul Kautz Geologist

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.