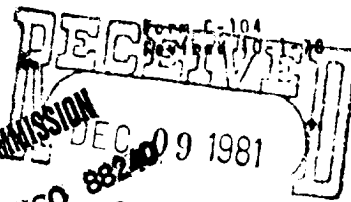


STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENTOIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Reason(s) for filing (Check proper box)		Other GAS MUST NOT BE	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	LEASED AFTER	2/1/82
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	UNLESS AN EXCEPTION TO R-4070	
Change in Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	IS OBTAINED from U.S.G.S.	
Dry Gas <input type="checkbox"/>			
Condensate <input type="checkbox"/>			

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Kringel Federal	Well No. 2	Pool Name, including Formation Sawyer (San Andres) Assoc.	Kind of Lease State, Federal or Fee Federal	Lease No. LC 063623
Location Unit Letter C : 660 Feet From The North Line and 1980 Feet From The West Line of Section 31 Township 9-S Range 38-E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183 - Houston, Texas 77001
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum Company	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1589 - Tulsa, OK. 74102
If well produces oil or liquids, give location of tanks. Unit C Sec. 31 Twp. 9-S Rge. 38-E	Is gas actually connected? When No

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Holes <input type="checkbox"/>	Diff. Holes <input type="checkbox"/>
Date Spudded 9-20-81	Date Compl. Ready to Prod. 11-18-81		Total Depth 5023'		P.B.T.D. 5023' Loggers TD			
Elevations (DF, RKB, RT, GR, etc.) 3943.6 GR	Name of Producing Formation San Andres		Top Oil/Gas Pay 4924'		Tubing Depth 4969'			
Perforations 4924' - 4967'					Depth Casing Shoe 5023'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		427'		300 sx Circ.			
7 7/8"	4 1/2"		5023'		800 lite, 300 50:50 PC Circ.			

VI. 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 oil - able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks 11-19-81	Date of Test 11-24-81	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 Hrs	Tubing Pressure 0	Casing Pressure 0	Choke Size 2"
Actual Prod. During Test	Oil - Bbls. 8	Water - Bbls. 2	Gas - MCF 96

GAS WELL		Gravity of Condensate	
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VII. 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.

E. W. Edge (Signature)
Operation Manager
12-7-81 (Date)

OIL CONSERVATION DIVISION
DEC 11 1981APPROVED _____, 19____
BY Jerry E. Smith
TITLE Dist. L. Supv.

This form is to be filed in compliance with RULE 100.
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviated tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all wells 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 ownership.
Separate Form C-104 must be filed for each pool in multi-