

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRODUCTION OFFICE		

OIL CONSERVATION DIVISION

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

Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator

SPENCE ENERGY COMPANY

Address 381 Two Energy Square, 4849 Greenville Ave.
Dallas, Texas 75206

Reason(s) for filing (Check proper box)

☒ New Well. ☐ Recompletion ☐ Change in Ownership

Change in Transporter of:

☐ Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate

Other (Please explain)

**CASINGHEAD GAS MUST NOT BE
FLARED AFTER 12-1-81
UNLESS AN EXCEPTION TO R-4070
IS OBTAINED.**

If change of ownership give name
and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
Kellahin 14 State	2	South Flying M-Bough	State, Federal or Fee State	LG-1041
Location				
Unit Letter <u>P</u> : <u>330</u> Feet From The <u>South</u> Line and <u>700</u> Feet From The <u>East</u>				
Line of Section <u>14</u> Township <u>9S</u> Range <u>32E</u> , NMPM, <u>Lea</u> 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"/>	Address (Give address to which approved copy of this form is to be sent)
NAVAJO REFINING COMPANY	P.O. Drawer 159, Artesia, N.M. 88210
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
WARREN PETROLEUM COMPANY	P.O. Box 1589, Tulsa, OK 74102
If well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>P</u> Sec. <u>14</u> Twp. <u>9S</u> Rge. <u>32E</u>	No

If this production is commingled with that from any other lease or pool, give commingling order number: No

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.

Jerry W. Long
JERRY W. LONG (Signature)
Agent
(Title)
September 9, 1987
(Date)

OIL CONSERVATION DIVISION

APPROVED NOV 4 1987, 19
BY Paul Kautz
TITLE Geologist

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 filled for each pool in multiply completed wells.

IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 7/12/87	Date Compl. Ready to Prod. 8/27/87		Total Depth 8964'		P.B.T.D. 8920'				
Elevations (DF, RKB, RT, GR, etc.) 4336.6 GR	Name of Producing Formation Bough		Top Oil/Gas Pay 8866'		Tubing Depth 8832'				
Perforations 8866 - 8889						Depth Casing Shoe 8960'			
TUBING, CASING, AND CEMENTING RECORD									
HOLE SIZE 11"	CASING & TUBING SIZE 8-5/8"		DEPTH SET 1690'		SACKS CEMENT 800				
7-7/8"	5-1/2"		8960'		475				

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. 8/28/87	Date of Test 8/28/87	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 8 HR	Tubing Pressure 140#	Casing Pressure PKR	Choke Size 1/2"
Actual Prod. During Test —	Oil - Bbls. 113.3 BOPD	Water - Bbls. 32.3 BWPB	Gas - MCF 100 MCF

* Calculated
GAS WELL

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

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