Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico rgy, Minerals and Natural Resources Departm

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.		FO TRA	NSPORT O	IL AND NA	FURAL G	AS				
Operator Duranto Od 1 Comp	Purvis Oil Corp.					Well API No.				
Address)-025-30978			
P.O. Box 11006, Mi	idland, Te	xas 79]	702							
Reason(s) for Filing (Check proper b	ox)			Othe	r (Please expl	lain)				
New Well			Transporter of:							
Recompletion	Oil Casinghead		Dry Gas Condensate							
(shapes of secretary size some										
and address of previous operator KI	nox Indust	ries,	Inc., P.C	Box 302	3, Midla	and, Tex	kas 79702			
II. DESCRIPTION OF WE	LL AND LEA	SE								
Lease Name	Well No. Pool Name, Inclu						Kind of Lease N State Federal or Fee NA COOR			
Federal 3C Location		2	Milnesa	nd Abo		State	receration ree	NM 68823	3	
Unit LetterC	. 1380)	Feet From The _	West	. 66	50 -	eet From The N	orth		
Onit Letter			reet from the _	Line	and	50 F	eet From The	JICH	Line	
Section 3 Tow	nship 9-S		Range 35-E	, NIV	ıрм, Lea	a		Cor	unty	
II. DESIGNATION OF TR	ANCDADTEE		CAND NATE	IDAL CAC						
Name of Authorized Transporter of O		or Condens			address to wi	hich approved	d copy of this form	is to be sent)		
Sun Refining & Mar				I			OK 74102	,		
Name of Authorized Transporter of C	•	X (or Dry Gas	Address (Give	address to wi	hich approved	l copy of this form	is to be sent)		
Warren Petroleum C f well produces oil or liquids,			Dan I Dan	 			OK 74102			
ive location of tanks.	Undit S	Sec. 1 3	Twp. Rge 9-S 35-E		connected?	When Un	ı? ıknown			
this production is commingled with	that from any other	r lease or po		1	er:					
V. COMPLETION DATA						· · · · · · · · · · · · · · · · · · ·				
Designate Type of Completi	ion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back Sai	me Res'v Diff I	Res'v	
Date Spudded		Date Compl. Ready to Prod.			Total Depth		<u> </u>			
	Date Compr.	Date Compi. Ready to Flod.					P.B.T.D.			
levations (DF, RKB, RT, GR, etc.)	Name of Pro	Name of Producing Formation			ıy		Tubing Depth			
erforations										
crossons							Depth Casing Si	юе		
	$\overline{\pi}$	JBING, C	CASING AND	CEMENTIN	G RECOR	D	<u> </u>			
HOLE SIZE	I	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT		
····										
										
					· · · · · · · · · · · · · · · · · · ·					
. TEST DATA AND REQU	EST FOR AL	LOWAI	BLE	<u> </u>						
	er recovery of Iola			i be equal to or ex	xceed top allo	wable for this	depth or be for fi	ull 24 hours.)		
tate First New Oil Run To Tank		Producing Method (Flow, pump, gas lift,								
ength of Test	Tubing Con-		*	Casina Danasa			Chake Cine			
angul of rea	Tuoing Fress	Tubing Pressure		Casing Pressure			Choke Size			
ctual Prod. During Test	Oil - Bbls.	Oil - Bbls.		Water - Bbls.			Gas- MCF			
GAS WELL										
ctual Prod. Test - MCF/D	Length of Ter	st		Bbls. Condensa	te/MMCF		Gravity of Conde	ensale		
esting Method (pitot, back pr.)	Tubing Press	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size		
(prior, ozen priy	i a sing i i sina							GIORE GIZE		
I. OPERATOR CERTIF	CATE OF C	OMPI	IANCE							
I hereby certify that the rules and re	gulations of the Oi	il Conservat	ion		IL CON	SERVA	ATION DI	VISION	1	
Division have been complied with a	nd that the informa	ation given :	above					U - 100	ŧ.	
is true and complete to the best of m	y knowledge and	belief.		Date A	Approved	d				
U.J. tun	wi						11			
Signature				By Original by, Paul Kauta Goodings						
J. H. Purvis			ident			Capity a	s t	-		
Printed Name 07/01/91	(itle 82-7346	Title_						
Date	·	Telepho								

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.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.