

Submit 5 Copies  
Appropriate District Office  
DISTRICT I  
P.O. Box 1980, 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-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator Spence Energy Co.	Well API No. 30-025-31104
Address 4849 Greenville Ave STE #381 Dallas Texas 75206	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Kellahin State (14)	Well No. 4	Pool Name, Including Formation South Flying M- Bough	Kind of Lease State, Federal or Fee	Lease No. LG-1041
Location Unit Letter P : 980' Feet From The South Line and 330' Feet From The East Line Section 14 Township 9S Range 32E, 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"/> Navajo Refining	Address (Give address to which approved copy of this form is to be sent) 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"/> Warren Petroleum	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 P	Sec. 14	Twp. 9S	Rge. 32E	Is gas actually connected? When ? yes 3-29-91

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

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 1-7-91	Date Compl. Ready to Prod. 3-31-91		Total Depth 8950'			P.B.T.D. 8907'		
Elevations (DF, RKB, RT, GR, etc.) 4336.4 GL	Name of Producing Formation Bough		Top Oil/Gas Pay 8876'			Tubing Depth 8904'		
Perforations 8876'-8882'						Depth Casing Shoe 8950'		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
11"	8 5/8"		1690'			600 sx		
7 7/8"	4 1/2"		8950'			400 sx		

V. 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 3-31-91	Date of Test 6-18-91	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 Hrs	Tubing Pressure 28#	Casing Pressure 30#	Choke Size none
Actual Prod. During Test	Oil - Bbls. 30	Water - Bbls. 26	Gas- MCF 12

GAS WELL

Actual Prod. Test - MCF/D 24	Length of Test 24	Bbls. Condensate/MMCF 0	Gravity of Condensate 0
Testing Method (pilot, back pr.) pumping	Tubing Pressure (Shut-in) 28#	Casing Pressure (Shut-in) 30#	Choke Size none

VI. 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  
Clay Spence  
Printed Name  
7-2-91  
Date  
Telephone No.

OIL CONSERVATION DIVISION

JUL 09 1991

Date Approved

By ORIGINAL SIGNATURE BY JERRY SEXTON

DISTRICT I JULY 1991

Title

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.