DISTRICT | P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Anesia, NM 88210

OIL CONSERVATION DIVISI _.N

P.O. Box 2088

DISTRICT III 1000 Rio Brizos Rd., Azioc, NM 87410

Santa Fe, New Mexico 87504-2088

1000 Rio Brizos Rd., Aziec, NM 87410	REQUEST FOR ALLOWABLE AND AUTHORIZATION										
Coperator		TO TRA	NSP	ORT OIL	. AND NA	TURAL GA	.S Well A	PINO.			
Xeric Oil & Gas	Company	7								:	
Address											
P. O. Box 51311 Reason(s) for Filing (Check proper box)	Mid.	land, T	exas!	79710	Oth	er (Please expla	is)				
New Well		Change in	Trupape	orter of:	ري وي	of the second subse	,				
Recompletion	Oil Dry Gas										
Change in Operator	Casinghea	id Gii 🗌	Conce	<u> vaa</u>	 						
If change of operator give name and address of previous operator											
II. DESCRIPTION OF WELL	AND LE	ASE									
Milnesand Unit	Well No. Pool Name, Includir				ing Formation and-San	Andres		Foderal or Foe		16 No. 52178	
Location							`				
Unit Loner O	- :6	60	_ Feet F	rom The	South La	e and19	80 Fo	et From The _	East	Line	
SectionSW SE 14Townshi	p 8S Range 34E				, NMPM,			Roosevelt County			
III. DESIGNATION OF TRAN	יד מ רופי	TR OF C	II AN	m nati	PAT CAS						
Name of Authorized Transporter of Oil	(A)	or Coode		لسا ۲ <u>۲۰۱۷۱۲ ت</u>		ve address so wi	nich approved	copy of this fo	orm is to be see	ਪ)	
Pride Pipeline Compa					P. O.	Box 2436	Abile	ne, TX 79604			
Name of Authorized Transporter of Casing		, \square	or Dr	y C11	Address (Gr	ve address to wh	tich approved	copy of this fo	orm is to be set	v)	
Warren Petroles If well produces oil or liquids, give location of tanks.	Uni:	S∞.	Twp.	Rge	li gai actual	ly connected?	When	n 7			
If this production is commingled with that	from any or	her lease or	1 pool. 2	YE COMMINE	ling order num)ber:			•••		
IV. COMPLETION DATA											
Designate Type of Completion	· (X)	011 Wel	1	Car Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Speeded	Date Con	npl. Ready 1	lo Prod.		Toul Depar		<u> </u>	P.B.T.D.	·		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top OIVC:	Piy		Tubing Dep	Tubing Depth		
Perforuioas				:			Depth Casing Shoe				
HOLE SIZE					CEMENT	NG RECOR	.D	Τ			
NOCE SIZE	CASING & TUBING SIZE			1	DEPTH SET		SACKS CEMENT				
				V	· · · · · · · · · · · · · · · · · · ·						
					:						
V. TEST DATA AND REQUES	TEOR	ATT OU	A D I C	,	1	·					
OIL WELL Test must be after re					l be equal to o	r exceed top all	owable for the	s death as he i	for full 2d hour	1	
Date First New Oil Run To Tank	Date of To	t 2			Producing M	whod (Flow. pi	urp, gas 141.	ic.)	or juil 24 now	3.)	
Leagth of Test					<u> </u>						
Exagat of Tex	Tubing Pr	ಶಾಡಚ			Casing Press	nr		Choke Size			
Actual Prod. During Test	Oil · Bbls.				i Water - Bols			Ou- MCF			
GAS WELL	!							!		·	
Actual Prod. Test - MCF/D	Length of Tex;				Bbir. Coade	1 LE WAMOF	·	Gravity of Condensate			
esting Method (pitot, back pr.)	Tubing Pressure (Sheet-in)				Casing Press	ore (Shut-in)		Choke Size			
AI ODED Y TOD CED TOTAL	1 mm 0 m	7.000.0			-) 			!			
VI. OPERATOR CERTIFIC. I hereby certify that the rules and regula Division have been complied with and to	tions of the	Oil Conse	TV1 Iron			OIL CON	SERV.	ATION	DIVISIO	N	
is true and complete to the best of my k	nowledge 1	und belief.	VII 400Y	•	Date	. A a a z a	٦	MAR 1	3		
	>				Date	Approve	u				
Signature					By_	∩u! -	r. Signed	her			
Gary S. Barker Printed Name		Vice		ident		Pi	ul Kant				
3/10/92		_915/6	TiUc		Title		eologist				
Date			<u>v>-4</u>		11						

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
- 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.

Telephone No.







Job separation sheet

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

State of New Mexico argy, Minerals and Natural Resources Departm

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

Salita Pe, New Mexico 67304-200

1000 Rio Brazos Rd., Aztec, NM 87410			ALLOWAE											
Operator									Well API No.					
Xeric Oil & Gas Con														
P. O. Box 51311 Mic	dland, '	<u> Texas</u>	79710											
Reason(s) for Filing (Check proper box) New Well	•		insporter of:	X Oth	ner (Please expl	ain)								
Recompletion	Oil	Dr			TA									
Change in Operator	Casinghead C	as Co	ndensate											
If change of operator give name and address of previous operatorBro	eck Ope	<u>rating</u>	Corp.	Р. О.	Box 91	l Breck	enrido	je, Tex	as 7642 <i>4</i>					
II. DESCRIPTION OF WELL	AND LEAS	E												
Lease Name	1						of Lease Fed Lease No.							
Milnesand Unit	l	44 1	<u> 4ilnesar</u>	id-San	Andres			<u> </u>	062178					
Unit Letter	:66	0 Fe	et Prom The	South Lin	e and	980 Fe	et From The	East	Line					
SW SE 14 Township	p 8S	Ra	nge 34E	, N	мрм,		Roosev	relt	County					
III. DESIGNATION OF TRAN		OF OIL			•									
Name of Authorized Transporter of Oil Mobil Pipeline Co	I	ne address so w			· · · · · · · · · · · · · · · · · · ·									
Name of Authorized Transporter of Casing	Name of Authorized Transporter of Casinghead Gas X or Dry Gas						copy of this	form is to be s	ent)					
Warren Petroleum Company If well produces oil or liquids, Unit Soc. Twp.				P . Is gas actual!		589 Tulsa, Oklahoma 7410								
give location of tanks.	,	4	89 34E	-	Yes		1-1-64	<u> </u>						
If this production is commingled with that it IV. COMPLETION DATA	from any other l	ease or pool	l, give commingl	ing order num	ber:									
Designate Type of Completion	- (X)	Dil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v					
Date Spudded	Date Compl. F	leady to Pro	i	Total Depth	1	<u> </u>	P.B.T.D.	<u> </u>						
Elevations (DF, RKB, RT, GR, etc.)	Top Oil/Gas	Pay	· · · · · · · · · · · · · · · · · · ·	Tubing Depth										
Perforations	<u> </u>						Depth Casing Shoe							
1 M 1 M and M 10							Depui Casii	ig snoe						
	CEMENTI	NG RECOR		<u> </u>										
HOLE SIZE	HOLE SIZE CASING & TUBING SIZE				DEPTH SET		SACKS CEMENT							
						2.1 1								
V. TEST DATA AND REQUES	T FOR ALI	OWABI	LE	L				~						
OIL WELL (Test must be after re Date First New Oil Run To Tank		volume of la	ad oil and must		exceed top allo			for full 24 hou	rs.)					
Date List Iven Oil Kun 10 140k	Pate First New Oil Run To Tank Date of Test					υπφ, gus 191, e	.c.,							
Length of Test	Tubing Pressur	e		Casing Press.	ile.		Choke Size							
Actual Prod. During Test	Oil - Bbls.			Water - Bbls.	· · · · · · · · · · · · · · · · · · ·	.,	Gas- MCF							
GAS WELL	L <u></u>			l			J							
Actual Prod. Test - MCF/D	Length of Test			Bbls. Conden	mie/MMCF		Gravity of C	condensate	1					
The Material Color of the Color				<u> </u>	(8b. 4 !-S		Choke Size							
ening Method (puot, back pr.)	g Method (pitot, back pr.) Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Crioke Size						
VI. OPERATOR CERTIFICA	ATE OF C	OMPLL	ANCE		211 001	ICED'	\TION	רוי ייכיכ						
I hereby certify that the rules and regula Division have been complied with and the				(OIL CON	IOEHVA	ALION		101					
is true and complete to the best of my k				Date	Approve	d	AU	d To g	3 (3)					
1. 11	Orig. Signed by													
Signature					By Paul Kautz									
Frances Flournoy Production Clerk Printed Name Title						<u>, L:e</u> 0	logist							
7/31/91	(817)	559-	3355	Title.										
Date		Telephon	e No.											

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