abmit 5 Copies
Appropriate District Office
DISTRICT I
1.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

P.O. Box 2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION

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

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

Santa Fe, New Mexico 87504-2088

[.	7	O TRA	NSP	ORT OIL	AND NA	TURAL GA	\S				
Operator Operator			Well	PI No.							
Murphy Operating Corporation											
P. O. Drawer 2648, Roswell, New Mexico 88202-2648											
Reason(s) for Filing (Check proper box) Other (Please explain) New Well Change in Transporter of:											
Recompletion Oil Dry Gas											
Change in Operator Casinghead Gas Condensate Change effective June 1, 1989											
If change of operator give name Mims Texas Oil & Gas, 7060 S. Yale, #707, Tulsa, Oklahoma 74136											
II. DESCRIPTION OF WELL AND LEASE											
Lease Name			Pool N	ame, Includi	ng Formation Kind o			of Lease No.			
Federal 26	San Andres XXXX			Federal of Fee NM-0108997-A							
Location Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East Line											
Unit Letter <u>J: 1980</u> Feet From The <u>SOUTH</u> Line and <u>1980</u> Feet From The <u>East</u> Line											
Section 26 Township 7-South Range 33-Fast , NMPM, Roosevelt County											
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS											
Name of Authorized Transporter of Oil Mobil Oil Corporation						Address (Give address to which approved copy of this form is to be sent) P. O. Box 900, Dallas, Texas 75221					
Name of Authorized Transporter of Casinghead Gas (XX) or Dry Gas						Address (Give address to which approved copy of this form is to be sent)					
OXY Gities Service NGL, Inc.					P. Ò.	Box 300,	Túlsa,	0k1ahor	Oklahoma 74102		
If well produces oil or liquids, Unit Sec. ive location of tanks.			Twp.	Rge.	Is gas actually connected? When			?			
If this production is commingled with that f	rom any othe	r lease or p	xxxl, giv	e commingly					~		
IV. COMPLETION DATA		·									
Designate Type of Completion -	· (X)	Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded Date Compl. R			Prod.		Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil∕Gas Pay			Titie Dad			
								Tubing Depth			
Perforations						Depth Casing Shoe					
TUBING, CASING AND CEMENTING RECORD											
HOLE SIZE CASING & TUBING SIZE						DEPTH SET		SACKS CEMENT			
							~				
								<u> </u>			
V. TEST DATA AND REQUES OIL WELL (Test must be after re				oil and must	he equal to or	exceed ton allo	wahla for thi	n dansh or ha	for full 24 hour	1	
Date First New Oil Run To Tank	Date of Test		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7A 47A 77A31		ethod (Flow, pu			or juit 24 now	3./	
									Choka Siaa		
Length of Test	Tubing Pressure				Casing Pressure			Choke Size			
Actual Prod. During Test	Prod. During Test Oil - Bbls.							Gas- MCF			
C L O TYTTY T					<u> </u>			<u></u>			
GAS WELL Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate			
					Dois. Condensatory ITAC			Gravity of Contentant			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
VI. OPERATOR CERTIFICA	ATE OF	COMP	LIAN	ICE.	<u> </u>			<u> </u>			
I hereby certify that the rules and regulations of the Oil Conservation						OIL CONSERVATION DIVISION					
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.						Date Approved JUL 0 6 1989					
					Date	Date Approved					
Signature Sauer					Bv_	By Eddie W. Seav					
Donna Bauer Production Supervisor					By Eddie W. Seay Oil & Gas Inspector						
Printed Name June 26, 1989 (505)623-7210					Title	· · · · · · · · · · · · · · · · · · ·			. 1		
Date Telephone No.											

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.