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

## State of New Mexico En /, Minerals and Natural Resources Departmen.

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., Aziec, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator							Well A				
•	DODATIO	N.I					i .	30-041	-10	635	
MURPHY OPERATING COR	PURATIC	<u> </u>						<del>900</del>			
Address				00000	0.040					·	
P.O. Drawer 2648, Ro	<u>swell.</u>	New Me	ex1co	88202-3	<u>(1648</u>	r (Please explai					
Reason(s) for Filing (Check proper box)			_		C Outre	i (riease explai	и)				
Yew Well		Change in	-			Chango	offecti	ve August	1 10	80	
Recompletion	Oil	X	Dry Gas	; <u> </u>		Change	errecti	ve August	. 1, 13	ا "	
Change in Operator	Casinghead	l Gas	Conden	sate 🔲						1	
change of operator give name											
nd address of previous operator			<u> </u>							<del> </del>	
	4 N IYO X YO A	cre									
L DESCRIPTION OF WELL	AND LEA	72F	In 137	7 -7 -12			Tron	6.T	1	ise No.	
ase Name		Well No. Pool Name, Including						Kind of Lease State, Fodoral on Fee			
State V		3	<u>  Cha</u>	<u>veroo S</u>	<u>an Andr</u>	es	, y	XXXXXXX	0 <u>G</u> 4	897	
Location											
V	. 23:	1/1	East En	om The S	outh riv	and330	() Fa	t From The	Wė	St Line	
Unit LetterK	. :	k.T	_ rea rn	MI 100	1274 PAIT - TAIK	- And	10				
20 = 11	7 6	<del></del> .	D	34 Ea	c+ NA	ирм,	Roos evel	+		County	
Section 30 Township	> / 50	outh	Range	<u>34_Ea</u>	21.1	arwi,	KOOS EVE	<u> </u>		County	
II. DESIGNATION OF TRAN	SPORTE	R OF O	IL AN	<u>D NATUR</u>	AL GAS						
Name of Authorized Transporter of Oil		or Conde	315316	$\neg$ $\mid$	Address (Giv	e address so wh	uch approved	copy of this form	is to be ser	u)	
Texaco Trading & Tra		ation	Inc.		P.O.	Box 6062	8. Midla	and Texas	79711-	0608	
Name of Authorized Transporter of Casing	obead Gas	<b></b>	or Dry	Gas 🗍				copy of this form			
					(						
DXY NGL tre			Twp.	- B	Te one set !!	V connect - 10	10h	2			
If well produces oil or liquids,	Unit	Unit Sec.		Rge.	Is gas actually connected?		) when	When?			
give location of tanks.											
I this production is commingled with that	from any oth	er lease or	pool, giv	ve commingli	ng order num	ber:					
IV. COMPLETION DATA											
TV. COM BELLOT STATE		Oil Wel	1	Gas Well	New Well	Workover	Deepen	Plug Back S	ame Res'v	Diff Res'v	
Designate Type of Completion	- (X)	1	i			i	1	1		i	
		1 2 - 1 - 1	- Bood		Total Depth	ــــــــــــــــــــــــــــــــــــــ		P.B.T.D.			
Date Spudded	Date Com	pl. Ready t	o Prod.		rom isopai			P.B. 1.D.			
					* *						
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation						Top Oil/Gas Pay			Tubing Depth		
Perforations								Depth Casing	Shoe		
1 611014110115											
			CAC	DIC AND	CEMENT	NIC PECOL	20				
					CEMENT	NG RECOR		-	CVC CEL		
HOLE SIZE	CA	SING & T	UBING	SIZE	ļ	DEPTH SET		58	CKS CEM	ENI	
	1										
	<del></del>							1			
THE PROPERTY OF THE PROPERTY O	CT FOR	ALLOW	VARIE	7	<u> </u>			<u> </u>			
V. TEST DATA AND REQUE	SIFOR	ALLOT	ייינעעי		h		llaumble for th	ie denth or he fo	r full 24 ho	urs)	
OIL WELL (Test must be after			e of loca	ou ana musi	De equal to a	Articl (Fig.	1:6	eta )	7 7121 27 710		
Date First New Oil Run To Tank	Date of T	टेड			Producing r	Method (Flow, p	pump, gas iyi,	216.)			
Length of Test	Tubing P	ressure			Casing Pres	sure		Choke Size			
Lengur G. 163	7.00.00							1			
					Water - Bb	ls.		Gas- MCF			
Actual Prox During Test	Oil - Bbl	s.				Trace - pois			,		
					<u> </u>			<del></del>			
CACATELY						•			•		
GAS WELL	Length o	f Ter			Bbls. Cond	ensate/MMCF		Gravity of C	ondensate		
Actual Prod. Test - MCF/D	Length o	N 1691			Bois. Condensate/vilvici						
	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			· Choke Size			
Testing Method (pitot, back pr.)	Tubing	Pressure (S	hut-in)		Casing Pre	sense (2um-in)		Cloke Size			
_ "											
The second second	CATE C	T COL	ACDI TA	NICE							
VI. OPERATOR CERTIFI	CAIE	of CON	الملكلة الملكارة	AACT		OIL CC	NSER	NOITAV	DIVISI	ON	
I hereby certify that the rules and reg	gulations of t	he Oil Coo	SETVELLO	ı '	11	0		COT	1 0 1	oga -	
Division have been complied with and that the information given above					- 11	OGT 1 8 1989					
is true and complete to the best of m	y knowledge	and belief			Da	te Approv	ved				
$\rightarrow 11 26$						• •					
JAX, IAINA	211				_	•	ORIGINAL	SIGNED BY	JERRY 51	SKICIN:	
	)/[/							TRICT I SUPE	Q (15 ) (15 ) (16 )		
	)/[				By		<del></del>	<del>(4   64   65   4   15   15   14   4</del>	34C 11 1-3 C-2 E-2		
Signature Ori A Brown	Prod	uction	Supe	ervisor							
Ľori A. Brown	Prod	uction	Supe	ervisor							
Printed Name			Title	e							
Ľori A. Brown		505) 6	Title	e 210							

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.