

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., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator PLAINS PETROLEUM OPERATING COMPANY		Well API No. 30-041-20437
Address 415 W. Wall, Suite 1000 Midland, TX 79701		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: <input checked="" type="checkbox"/> Other (Please explain) Recompletion <input checked="" 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 Bluitt 13 Federal	Well No. 15	Pool Name, Including Formation Bluitt San Andres Associated	Kind of Lease State, Federal or Fee	Lease No. NM044216
Location Unit Letter 0 : 660 Feet From The South Line and 1980 Feet From The East Line Section 13 Township 8S Range 37E, NMPM, Roosevelt County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)				
Warren Petroleum	P. O. Box 1589 Tulsa, OK 74102				
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected? When?
					Yes 12-3-93

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	Gas Well <input checked="" type="checkbox"/>	New Well	Workover	Deepen	Plug Back <input checked="" type="checkbox"/>	Same Res'v	Diff Res'v
Date Spudded 11-16-93 *	Date Compl. Ready to Prod. 11-24-93		Total Depth 4745'		P.B.T.D. CIBP @ 4589'			
Elevations (DF, RKB, RT, GR, etc.) Gr 3997'	Name of Producing Formation San Andres P ₁		Top Oil/Gas Pay 4527'		Tubing Depth 2-3/8" @ 4486'			
Perforations 4527' - 4579' 1 JSPF					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12-1/4"	8-5/8"		402'		325 sx			
7-7/8"	4-1/2"		4740'		1500 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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D 4456	Length of Test 24 hr	Bbls. Condensate/MMCF Dry	Gravity of Condensate
Testing Method (pilot, back pr.) Bk Pr	Tubing Pressure (Shut-in) 1192 psig	Casing Pressure (Shut-in)	Choke Size 10/64" - 20/64"

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.

Bonnie Husband
Signature
Bonnie Husband Administrative Assist
Printed Name
Dec. 14, 1993 915/683-4434 Title
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved FEB 22 1994

By
ORIGINAL SIGNED BY JERRY SEXTON
Title DISTRICT I SUPERVISOR

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.