

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Item C-104
Supersedes Old C-104 and C-11
Effective 1-1-65

Reason(s) for filing (Check proper box)				Other (Please explain)		
New Well	<input type="checkbox"/>	Change in Transporter of:			Change operator name from NRM Petroleum Corporation to Natural Resource Management Corporation effective January 1, 1986.	
Recompletion	<input type="checkbox"/>	Oil	<input type="checkbox"/>	Dry Gas		<input type="checkbox"/>
Change in Ownership	<input type="checkbox"/>	Casinghead Gas	<input type="checkbox"/>	Condensate		<input type="checkbox"/>

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
Tucker	1	Wildcat	State, Federal or Fee Fee	
Location				
Unit Letter <u>C</u> ; 1980 Feet From The <u>West</u> Line and <u>660</u> Feet From The <u>North</u>				
Line of Section <u>5</u>	Township <u>7S</u>	Range <u>33E</u>	<u>NMPM, Roosevelt</u>	County

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

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. Ready to Prod.	Total Depth				P.B.T.D.			
Elevations (DF, RKB, RT, CR, etc.)	Name of Producing Formation	Top Oil/Gas Pay				Tubing Depth			
Perforations						Depth Casing Shoe			

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

Date First New Oil Run To Tanks	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

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

Mary Douglas
(Signature)
Production Analyst
(Title)
February 21, 1986
(Date)

APPROVED _____ SEP 17 1986 _____ , 19____
BY _____
TITLE _____

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

RECEIVED
FEB 25 1986
O.C.D.
HOBBS OFFICE