

DISTRIBUTION			
SA	TA	FE	
FI	E		
G.S.			
ID	OFFICE		
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

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

Form C-104
Supersedes Old C-104 and C-111
Effective 1-1-65

I. Operator
NRM Petroleum Corporation
Address
600 W. Illinois, Suite 800 - Midland, Texas 79701
Reason(s) for filing (Check proper box)
New Well ☒ Change in Transporter of:
Recompletion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

R-7434
Lease Name Metzger Well No. 3 Pool Name, Including Formation Chaveroo San Andres Kind of Lease State, Federal or Fee Fee Lease No.
Location
Unit Letter B : 567 Feet From The North Line and 1787 Feet From The East
Line of Section 17 Township 7S Range 34E , NMPM, Roosevelt County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☐ or Condensate ☐
Western Oil Transportation Co. Address (Give address to which approved copy of this form is to be sent)
P. O. Box 838 Hobbs, New Mexico
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐
Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. Unit J Sec. 17 Twp. 7S Rge. 34E Is gas actually connected? No When Do not know

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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 11-19-83	Date Compl. Ready to Prod. 12-10-83	Total Depth 4390'	P.B.T.D. 4347'					
Elevations (DF, RKB, RT, GR, etc.) 4318 GR	Name of Producing Formation San Andres	Top Oil/Gas Pay 4223'	Tubing Depth 4290'					
Perforations 4223'-4263'			Depth Casing Shoe 4390'					

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4	8 5/8" 24#	1830'	750 SX
7 7/8"	4 1/2" 10.5#	4390'	1580 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 Tanks 12/30/83	Date of Test 1-3-84	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure 20#	Casing Pressure 0	Choke Size
Actual Prod. During Test 82 bbls	Oil-Bbls. 82	Water-Bbls. 0	Gas-MCF 24

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

William Hunt
(Signature)
Production Superintendent
(Title)
January 4, 1984
(Date)

OIL CONSERVATION COMMISSION

JAN 31 1984
APPROVED
BY ORIGINAL SIGNED BY JERRY SEXTON, 19
DISTRICT SUPERVISOR
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

JAN 30 1984

O.C.D.
HOBBES OFFICE