

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 Snyder Oil Company		Well API No. 3004120763
Address 801 Cherry Street, Suite 2500 Fort Worth, Texas 76102		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/> Change in Transporter of:		
Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>		
Change in Operator <input checked="" type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator		Natural Resource Management Corporation 2121 San Jacinto, Suite 2600 Dallas, Texas 75201

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name Metzger	Well No. 8	Pool Name, including Formation Chaveroo, San Andres	Kind of Lease State, Federal or Fee	Lease No. 03132
Location Unit Letter <u>0</u> : <u>467</u> Feet From The <u>South</u> Line and <u>2173</u> Feet From The <u>East</u> Line Section <u>17</u> Township <u>7S</u> Range <u>34E</u> , <u>NMPM</u> <u>Roosevelt</u> County				

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Western Oil Transportation - <u>Pride Pipeline</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. Box 1183 Houston, Texas 77001</u>	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	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 <u>0</u>	Sec. <u>17</u>
	Twp. <u>7S</u>	Rge. <u>34E</u>
Is gas actually connected?	When ? <u>N/A</u>	
If this production is commingled with that from any other lease or pool, give commingling order number: <u>N/A</u>		

**IV. COMPLETION DATA**

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res v	Drill Res v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		

**TUBING, CASING AND CEMENTING RECORD**

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

**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 Rns 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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (prior, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

**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.

Tom J. Bass Jr.  
Signature  
Tom J. Bass Jr. Sr. V.P. - Engineering  
Printed Name  
5/9/89  
Date  
817/338-4043  
Telephone No.

**OIL CONSERVATION DIVISION**  
**JUL 06 1989**

Date Approved \_\_\_\_\_  
By Eddie W. Seay  
Oil & Gas Inspector  
Title \_\_\_\_\_

**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.