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

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

State of New Mexico Minerals and Natural Resources Department Ene.

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

TO TRANSPORT OIL AND NATURAL GAS

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

perator								1 No.			
MURPHY OPERARING CORPO	ORATION_										
dress			: 00	0202 26	:/ΙΩ	:	•				
0.0. Drawer 2648, Rosi	well, Nev	w Mex	1C0 88	3202-20	040	t (Please explain					
eason(s) for Filing (Check proper box)					C) Oute						
ew Well		hange in				Change e	effectiv	e August	1, 198	;9	
ecompletion	Oil		Dry Gas	_							
nange in Operator	Casinghead (Gas	Condens	21E							
change of operator give name if address of previous operator			<u>·</u>								
DESCRIPTION OF WELL	AND LEAS	SE					-				
ease Name	12 12 22 17	Well No.	Pool Na	me, Includin	g Formation			Lease			
Haley Chaveroo SA Uni	t Sec 3	7	Ch	averoo	San And	res	State, I	KAKAKAN XAXDEK	NM .	1003	
ocation											
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Unit Letter G											
Section 3 Townsh	ip 8 S	South	Range	:33 l	East , N	ирм, С	haves			County	
	<u> </u>	_									
I. DESIGNATION OF TRAI	ISPORTER	≀ OF O	IL ANI	<u>O NATUF</u>	RAL GAS		· · · · · · · · · · · · · · · · · · ·	6.11. 6			
arne of Authorized Transporter of Oil	[X] (or Conder	nsate [Address (GIV	e address to whi	u <i>n approvea</i> Midla	copy of this form nd, Texas	79711	-0608 '	
Texaco Trading & Tran	ısportati	<u>ion Ir</u>	1C.								
lame of Authorized Transporter of Casin	ighead Gas	\bowtie	or Dry (Gas []	Address (GIV	e accress to whi	ich approvea	copy of this form	1 15 10 06 36	ν)	
OXY NGL Inc					To		When	?			
well produces oil or liquids,	Unit	Sec.	Twp.	i vše	Is gas actuall	1 compaces	i when	•			
ve location of tanks.					ing order num	her:	1				
this production is commingled with that	t from any othe	i jease of	prox, grv	- wininikii	b v.co. num						
v. COMPLETION DATA		Oil Wel	1 (Gas Well	New Well	Workover	Deepen	Plug Back S	ame Res'v	Diff Res'v	
Designate Type of Completion	1 - (X)	1011 1161	. ,			1	. ,	j		1	
Date Spudded	Date Compl	I. Ready I	o Prod		Total Depth		.l	P.B.T.D.			
ale species	,	•									
levations (DF, RKB, RT, GR, etc.)	evations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth		
devadous (Dr.) and)											
erforations								Depth Casing	Shoe		
	TUBING, CASING AND					NG RECOR	D D				
HOLE SIZE	HOLE SIZE CASING & TU			SIZE	<u> </u>	DEPTH SET		SACKS CEMENT		ENT	
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	707	T T O T	GADIE								
V. TEST DATA AND REQU	たくふ だいり V	YLLOY	VARI.E.								
	MADA ICE				the equal to	r exceed top all	loughle for th	is depth or be for	r full 24 ho	w 3./	
	r recovery of to	otal volum	re of load	oil and mus.	t be equal to a	or exceed top all	lowable for il	is depth or be for	or full 24 ho	ω 3./	
	Date of Te	otal volum	ve of l∞ad	oil and mus	Producing N	or exceed top all Method (Flow, p	lowable for th ump, gas lift,	is depth or be for	or full 24 ho	<i>w</i> 3./	
Date First New Oil Run To Tank	Date of Te	otal volum	ve of load	oil and mus	Producing M	Method (Flow, p	lowable for th nump, gas lift,	is depth or be for	or full 24 ho	w 3.7	
OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test	r recovery of to	otal volum	se of load	oil and mus	Producing N	Method (Flow, p	lowable for th nump, gas lift,	eic.)	or full 24 ho	w 3.,	
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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.