

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Petroleum Development Corporation
Address
9720 B Candelaria, NE Albuquerque, NM 87112
Reason(s) for Filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☒ Dry Gas ☐
Change in Operator ☐ Casinghead Gas ☐ Condensate ☒
If change of operator give name and address of previous operator

Well API No.
30-005-20044

II. DESCRIPTION OF WELL AND LEASE

Lease Name
Miller Federal
Well No.
1
Pool Name, including Formation
Tomahawk-San Andres
Kind of Lease
State Federal ☒
Lease No.
NM 046153A
Location
Unit Letter P : 660 Feet From The South Line and 660 Feet From The East Line
Section 34 Township 7S Range 31E, NMFM, Chaves County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil
Lantern Petroleum Corp. ☒ or Condensate ☒
Name of Authorized Transporter of Casinghead Gas
Warren Petroleum ☒ or Dry Gas ☐
If well produces oil or liquids, give location of tanks.
Unit Sec. Twp. Rge.
If this production is commingled with that from any other lease or pool, give commingling order number:

Address (Give address to which approved copy of this form is to be sent)
P.O. Box 2281; Midland, TX 79702
Address (Give address to which approved copy of this form is to be sent)
1350 S. Boulder, Tulsa, OK 74119
Is gas actually connected? When?

IV. COMPLETION DATA

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
Elevations (DF, RKB, RI, GR, etc.) Name of Producing Formation
Perforations

HOLE SIZE
SACKS CEMENT

V. TEST DATA

OIL WELL
Date First New Oil Run
Length of Test
Actual Prod. During Test
GAS WELL
Actual Prod. Test - MCF/D
Testing Method (pilot, back pr.)
O-TRNSP. OGRID NO.
G-TRNSP. OGRID NO.
OIL POD NO.
GAS POD NO.
Condensate/MMCF
Gravity of Condensate
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.

Signature
Jim C. Johnson
Printed Name
June 2, 1994
Date
Vice-President
Title
505-293-4044
Telephone No.

OIL CONSERVATION DIVISION

Date Approved JUN 08 1994

By
Title
Orig. Signed by
Paul Santa
Geologist

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.