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| LAND 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-110
Effective 1-1-65

| | |
|---|---|
| Operator MWJ Producing Company | |
| Address 1804 First National Bank Building, Midland, Texas 79701 | |
| Reason(s) for filing (Check proper box) | Other (Please explain) |
| New Well <input checked="" type="checkbox"/> | CASINGHEAD GAS MUST NOT BE RELEASED AFTER 12/1/79 UNLESS AN EXCEPTION TO R-407C IS OBTAINED. |
| Recompletion <input type="checkbox"/> | |
| Change in Ownership <input type="checkbox"/> | |
| Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> | |

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|---------------|--|--|---------------------|
| Lease Name State-32 | Well No. 3 | Pool Name, Including Formation Tom Tom (San Andres) | Kind of Lease State, Federal or Fee State | Lease No. K-3754 |
| Location Unit Letter <u>A</u> ; <u>660</u> Feet From The <u>North</u> Line and <u>330</u> Feet From The <u>East</u> Line of Section <u>32</u> Township <u>7 S</u> Range <u>31 E</u> , NMFM, <u>Chaves</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"/> Matador Pipe Line Inc. | Address (Give address to which approved copy of this form is to be sent) P.O.Box 1558, Breckenridge, Texas 76024 | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Unknown at this time. | 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. 32 |
| | Twp. 7S | Rge. 31E |
| | Is gas actually connected? <u>No</u> When | |

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 <input checked="" type="checkbox"/> | Gas Well <input type="checkbox"/> | New Well <input checked="" type="checkbox"/> | Workover <input type="checkbox"/> | Deepen <input type="checkbox"/> | Plug Back <input type="checkbox"/> | Same Res'v. <input type="checkbox"/> | Diff. Res'v. <input type="checkbox"/> |
| Date Spudded 9/8/79 | Date Compl. Ready to Prod. 9/30/79 | | Total Depth 4,000' | | P.B.T.D. 3955' | | | |
| Elevations (DF, RKB, RT, GR, etc.) 4287.5' | Name of Producing Formation San Andres | | Top Oil/Gas Pay 3787' | | Tubing Depth 3902' | | | |
| Perforations 3787-90; 3793-96; 3802-04; 3809-10'; 3815-18'; 3824-28'; 3834-44; 3871-74' | | | | | Depth Casing Shoe 4,000' | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 12 1/2" | 8 5/8" | | 1405' | | 625 sacks | | | |
| 7 7/8" | 4 1/2" | | 4,000' | | 325 sacks | | | |
| | 2 3/8" | | 4902' | | 0 | | | |

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 9/30/79 | Date of Test 9/30/79 | Producing Method (Flow, pump, gas lift, etc.) Flowing | |
| Length of Test 24 | Tubing Pressure 125 psi. | Casing Pressure | Choke Size 20/64" |
| Actual Prod. During Test 109 | Oil-Bbls. 104 | Water-Bbls. 5 | Gas-MCF 124 |

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.

Al. R. Meek
(Signature)
Agent
(Title)
10/1/79
(Date)

OIL CONSERVATION COMMISSION
APPROVED OCT - 4 1979, 19_____
BY John W. Kuyper
TITLE Geologist

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.
Separate Forms C-104 must be filed for each pool in multiply completed wells.