DISTRIBUTION SANTA FE

... ¿W MEXICO OIL CONSERVATION COMMISSI REQUEST FOR ALLOWABLE

Form C-104
Supersedes Old C-104 and C-116

FILE			AND	Effective 1-1-65
LAND OFFICE		AUTHORIZATION TO TR	ANSPORT OIL AND NATURAL	GA S
I OIL			-	
TRANSPORTER GAS				
OPERATOR				
PRORATION OFFICE			·	
NRM PETROLEUM CORPO	ייי על כבור	PTON		
Address	JIAI	TON		
900 Building of the	∍ So	outhwest Midland,	Texas 79701	
Reason(s) for liling (Check proper	box)		OINE CHENGHEAR G	AS MUST NOT RE
New Well X		Change in Transporter of: Oil Dry G	FLARED AFTER	3/4/80
Change in Ownership			ensote WALKS AN EXC	EPÍIÓN TO R-4070
If change of ownership give name and address of previous owner	16	n/a	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
and address of previous owner.		92 0	1 1 1	
DESCRIPTION OF WELL A	VD L	Well No. Pool Name, Including F	Formation Saw Unfree	N-6328 € Lease No.
Mooney		l Wildcat (San		
Location				100
Unit Letter A ;	660	Feet From The north til	ne and 660 Feet From	The <u>east</u>
	_	_		
Line of Section 17	Town	nship 7-S Range	31-E , NMPM, Chaves	County
DESIGNATION OF TRANSP	ORTI	ER OF OIL AND NATURAL GA	AS	
Name of Authorized Transporter of	O11 [X or Condensate	Address (Give address to which appro-	ved copy of this form is to be sent)
Basin, Inc. Name of Authorized Transporter of	Cart	nghead Gas or Dry Gas	511 W. Ohio Midland Address (Give address to which appro-	1, Texas 79701
no pipeline	Casii	ngheda Gas C	Address (Give dagress to which appro-	ved copy of this form is to be sent)
If well produces oil or liquids,		Unit Sec. Twp. Fige.	Is gas actually connected? Who	en
give location of tanks.	i	A 17 7-S 31-E	no	
	with	that from any other lease or pool,	give commingling order number:	n/a
COMPLETION DATA		Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Hes'v. Diff. Res'v.
Designate Type of Compl	etion	x - (X)	x	
Date Spudded		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
10-6-79 Elevations (DF, RKB, RT, GR, etc.		11-14-79 Name of Producing Formation	3962 Top Oil/Gas Pay	3962 Tubing Depth
4327.6 GR	., I.	San Andres	3869	3962'
Perforations				Depth Casing Shoe
3877', 80', 81', 85	<u>', :</u>		937', 44', 3958',59',60',	61' 3962'
1101 E C17E		TUBING, CASING, AND CASING & TUBING SIZE	D CEMENTING RECORD DEPTH SET	SACKS CEMENT
HOLE SIZE	-+	8-5/8"	428'	250
12-1/4" 7-7/8"		4-1/2"	3962'	1350
				<u> </u>
TEST DATA AND REQUEST OIL WELL	FOF	RALLOWABLE (Test must be a) able for this de	fter recovery of total volums of load oil (pth or be for full 24 hours)	and must be equal to or excessis appalians
Date First New Oil Run To Tanks	I	Date of Test	Preducing Method (Flow, pump, gas lif	i, etc.)
11-14-79		11-26-79	Pump	
Length of Test 24 hrs.	12	Tubing Pressure 20#	Casing Pressure	Choke Size
Actual Prod. During Test		Oil-Bbls.	Water-Bbls.	Open Gas-MCF
-	1	46	80	30
GAS WELL			Lavia Cardana de Car	
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
ŧ				
CERTIFICATE OF COMPLIA	NCE	5	OIL CONSERVA	TION COMMISSION
			APPROVED WAN 18	1980
hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given		Leave Seller		
shove is true and complete to	the b	beat of my knowledge and belief.	BY ALDEDINGOR	DISTRICTION
			TITLE SUPERVISOR	DINITION
Ceril hick			This form is to be filed in c	
cel fresh	4	Cecil Tucker	If this is a request for allow well, this form must be accompan-	able for a newly drilled or despensed lied by a tabulation of the deviation
Operations Manager	Rualm	••,	tests taken on the well in accord	ience with RULE 111.
	Title))	All sections of this form muse sbie on now and recompleted we	t be filled out completely for allow-
1-8-80	·		Fill out only Sections I. II.	III, and VI for changes of owner,
	(Dute)	,	well name or number, or transports	er, or other such change of condition.

RAILROAD COMMISSION OF TEXAS

OIL AND GAS DIVISION	6. RRC District 8-A	
INCLINATION REPORT (One Copy Must Be Filed With Each Completion Report.)	7. RRC Lease Number. (Oil completions only)	
1. FIELD NAME (as per RRC Records or Wildcat) 2. LEASE NAME	8. Well Number	
MOONEY	1	
3. OPERATOR NRM PETROLEUM CORPORATION	9. RRC Identification Number (Gas completions only)	
4. ADDRESS		
900 BUILDING OF THE SOUTHWEST - MIDLAND, TEXAS 79701	10. County	
5. LOCATION (Section, Block, and Survey)	CHAVES, N.M.	

RECORD OF INCLINATION

*11. Measured Depth (feet)	12. Course Length (Hundreds of feet)	*13. Angle of Inclination (Degrees)	14. Displacement per Hundred Feet (Sine of Angle X100)	15. Course Displacement (feet)	16. Accumulative Displacement (feet)
428	4.28	.50	.88	3.77	3.77
891	4.63	,50	.88	4.07	7.84
1,391	5.00	.75	1,31	6.55	14.39
1,891	5.00	1.00	1.75	8.75	23.14
2,308	4.17	1,50	2.63	10.97	34.11
2,808	5.00	1.00	1.75	8.75	42.86
3,100	2.92	1.00	1.75	5.11	47.97
3,478	3.78	1.00	1.75	6.62	54.59
3,533	.55	1.00	1.75	.96	55.55
3,832	2.99	1.00	1.75	5.23	60.78
	_				
					+
<u></u>					

if additional space to necessar, and the feet of the second	
17. Is any information shown on the reverse side of this form? 18. Accumulative total displacement of well bore at total depth of	yes
18. Accumulative total displacement of well bole at total depth of	
20. Distance from surface location of well to the nearest lease line	ieet.
21. Minimum distance to lease line as prescribed by field rules	feet.
22. Was the subject well at any time intentionally deviated from the	vertical in any manner whatsoever? NO
(If the answer to the above question is "yes", attach written ex	planation of the circumstances.)
INCLINATION DATA CERTIFICATION I declare under penalties prescribed in Article 6036c, R.C.S., that I am authorized to make this certification, that I have personal knowledge of the inclination data and facts placed on both sides of this form and that such data and facts are true, correct, and complete to the best of my knowledge. This certification covers all data as indicated by asterisks (*) by the item numbers on this form.	OPERATOR CERTIFICATION I declare under penalties prescribed in Article 6036c, R.C.S., that I am authorized to make this certification, that I have personal knowledge of all information presented in this report, and that all data presented on both sides of this form are true, correct, and complete to the best of my knowledge. This certification covers all data and information presented herein except inclination data as indicated by asterisks (*) by the item numbers on this form.
Signature of Authorized Representative	Signature of Authorized Representative
DALE TRULL - DRILLING SUPERINTENDENT Name of Person and Title (type or print)	Name of Person and Title (type or print)
VERNA DRILLING COMPANY Name of Company	Operator
Telephone: 806 894/9686	Telephone:Area Code
Railmad Commission Use Only:	

Approved By:	Title:	Date:	
Designates items certified by company that	conducted the inclination surveys.	O	*
SUBSCRIBED, AND SWORN T	O BEFORE ME THIS ダゲー	DAY OF (//tale) 1979	

AMANUAL HIMMANIA NOTARY PUBLIC MARRILL

COUNTY. TEXAS