DESTRIBUTION NEW MEXICO OIL CONSURVATION COMMISSION Dem C-104 SAHTA PE Supersedge Old C-101 and C-111 REQUEST FOR ALLOWABLE Effective 1-1-65 FILE VIND U.b.G.5, AUTHORIZATION TO TRAHSPORT OIL AND NATURAL GAS LAND OFFICE OIL TRANSPORTER GAS Submitted to obtain testing allowable OPERATOR PRORATION OFFICE pending tank battery installation. Chetaint Adams Exploration Company. Address P. O. Box 10585, Midland, Texas 79702 Reason(s) for filing (Check proper box) Other (Please explain) New Woll x Change in Transporter of: \square Recompletion OIL Dry Gas Condensate Casinahead Gas Change in Ownership If change of ownership give name and address of previous owner ____ DESCRIPTION OF WELL AND LEASE | Well No. | Pool Name, Including Formation Kind of Lease Leane No. #1 State 4 Undesignated San Andres State, Federal or Fee LG 1397 State Location 660 Feet From The north Line and 660 Feet From The , NMPM, Township Range Chaves County 8-S 32-E DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil X or Condensate Address (Give address to which approved copy of this form is to be sent) Phillips Petroleum Co. - Trucks Name of Authorized Transporter of Casinghead Gas 4001 Penbrook, Odessa, Texas 79762 Address (Give address to which approved copy of this form is to be sent) or Dry Ges When Sec. is gas actually connected? P.ge. Twp. If well produces oil or liquids, give location of tanks. 4 8-S !32-E If this production is commingled with that from any other lease or pool, give commingling order number: COMPLETION DATA Same Resty, Liff. Resty. Deepen Plug Back Gas Well New Well Workover Oil Well Designate Type of Completion - (X) P.B.T.D. Date Compl. Ready to Prod. Total Depth Date Soudded 4-23-80 <u>438</u>0 ' 4-30-80 Top Oll/Gas Pay Tubing Depth Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation 4521 GL 4363 San Andres 4226 Depth Casing Shoe Perforations 4378 TUBING, CASING, AND CEMENTING RECORD DEPTH SET SACKS CEMENT HOLE SIZE CASING & TUBING SIZE 1868 450 Howco lite & 200 12-1/4 8-5/8 Class C 4378 7-7/8 4-1/2 & 2-3/8 250 Class H (Test must be after receyery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours) TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Date of Yest Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks downhole pump 5-7-80 6-4-80 Choke Size Casing Pressur Tubing Pressure Lungth of Tost 75 psi 30 ps pumping Gam-MCF 24 hours Oil - Bbla. Water - Bble. Actual Pred. During 7421 20 90 TSTM GAS WELL Gravity of Condensate Bbls. Condenscts/NS/CF Langth of Test

Actual Fred, Test-MCF/D Casing Pressure (Lhut-in) Choke Size Tubing Presews (Shut-in) Teating hiethod (pitot, back pr.)

CERTIFICATE OF COMPLIANCE

I hereby cartify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above in true and complete to the best of my knowledge and belief.

(Date)

Helm

Operations Manager

(Tille) 6-4-80

OIL CONSERVATION COMMISSION

<u>1414 - 0 1980</u> APPROVED Orlg. Signed by DY. Jerry Sexton Die L Supv. TITLE _

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly diffied or deopered well, this form must be accompanied by a tebulation of the deviation tents taken on the well in accordance with MULE 111.

All portions of this form must be filled out completely for allowoble on new and recompleted walter

FIII out only Sactions I, II, III, and VI for changes of awaer, well name or number, or trousporter, or other such change of condition