DISTRICT II P.O. Drawer DD, Anesia, NM 88210 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brizos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO THANSPORT OIL AND NATURAL GAS

Petroleum Development		D.										
Address			NIM (יודק		·		······································				
9720-B Candelaria NE. Reason(s) for Filing (Check proper boz)	Albudi	uerque.	INIM }	2/11/2		Other (Please explain)				······································		
New Weil Recompletion	Oil	Change in	Transpor		7							
Change in Operator		d Gzz 🔲	-		j							
f change of operator give name and address of previous operator				<u> </u>				····				
I. DESCRIPTION OF WELL.	AND LE	ASE										
Strange Federal Well No. Pool Name, Lociudia Strange Federal 4 Tomahawk S							Kind o	lare.	1	case No.		
Location		4	101	llanaw	K 5	an Andres	State	Federal of Fee	NM	15677A		
Unit Letter	198	30	Feet Fr	om The	S	outh Line and 660	Fc	et From The	east	Line		
Soction 25 Townshi	, 7S		Range	31	F	, имрм, Сha	ives					
DOCTOR TOWNS	Ľ				·		1463			County		
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil		OF OF O		D NA.	TUE	RAL GAS Address (Give address to which	anneoud	capy of this form	is to be se	()		
Scurlock Permian						P.O. Box 4648, Houston, Tx 77251						
Name of Amborized Transporter of Casinghead Gas XX or Dry Gas Trident NGL, Inc.						Address (Give address to which approved copy of this form is to be sent) 10200 Grogans Mill Rd., The Woodlands, Tx 77386						
If well produces oil or liquids,	Upit	it Sec. Twp. Rgc.				Is gas actually connected?	, the Woodlands, 1x //380					
give location of tanks.	ocation of tanks. 0 25 7 31 s production is commingled with that from any other lease or pool, give comming				_	Yes						
If this production is commingled with that: IV. COMPLETION DATA	rom any ou	ner iease of	pool, giv	ve comm	ភបទារ	ng order number:			<u>-</u>	· · · · · · · · · · · · · · · · · · ·		
Designate Type of Completion	- (X)	Oil Wel		Gas Wei	1	New Well Workover	Deepen	Plug Back Sa	mo Resiv	Diff Rer'v		
Date Spudded		pl. Ready t	o Prod.			Total Depth		P.B.T.D.		<u></u>		
5/22/93	6/10/93					4770 MD		,				
Name of Producing Formation 4406.5 GR San Andres						Top Oil/Gas Pay 4066	Tubing Depth 3997 1					
Perforations		, , , , , , , , , , , , , , , , , , , 	* 				·	Depth Casing S				
Open hole (horizonta												
TUBING, CASING AND HOLE SIZE CASING & TUBING SIZE						DEPTH SET						
12-1/4"					1696		850 sx.					
7-7/8"						4288	1650 sx.					
<u> </u>												
V. TEST DATA AND REQUE	ST FOR	ALLOW	ABLE	,				<u> </u>				
OIL WELL (Test must be ofter recovery of total volume of load oil and must Date First New Oil Run To Tank Date of Test						be equal to or exceed top allows Freducing Method (Flow, pury			full 24 hou	rs.)		
6/21/93 Date of Test 6/21/93						Pump	ric.)	,				
Length of Test						Casing Fressure	Choke Size					
24 hrs. Actual Prod. During Test						Water - Dela	Gas- MCF					
timi Prod. During Test Cit - 2015.						į.	10					
GAS WELL												
Actual Prod. Test - MCF/D	Length of Test					Buts. Condensate/MMCF	Gravity of Condensate					
Testing Method (puot, back pr.)	Tubing P	Yeselm (SF	U.E)			Carlog Pressure (Shut-in)	· · · · · · · · · ·	Choke Size				
				~	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
VI. OPERATOR CERTIFIC				NCE		OIL CONS	SEDV	ΔΤΙΩΝ Β	MOIC	Э М		
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above						OIL CONSERVATION DIVISION						
is true and complete to the best of my knowledge and belief.						JUL 2 0 1993 Date Approved						
000						Jake Approved						
Signaus U.C. sonnson President						By ORIGINAL SIGNED BY JERRY SEXTON						
Printed Name Title						DISTRICT I SUPERVISOR						
7/14/93 293-4044 Date Telephone No.						Title			~			
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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.

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