Submit 5 Copies Appropriate District Office <u>DISTRICT 1</u> P.O. Box 1980, Hobbs, NM 88240

I.

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator							Well	API No.		
High Plains ()	<u>l Compa</u>	.ny						20-0	105-2	10733
1. 0. Box 141		Tatur	. Ver	w Hexic	o 88267	7				
leason(s) for Filing (Check proper box))	10,000	<u>, ac</u>	A TIGYTO		net (Please expl	ain)	·· · · · ·		
New Well		Change i	a Transp	orter of:		m (i icuse expa	<i>um)</i>			
Recompletion	Oil		Dry G							
Change in Operator	Casinghe	_	Conde							
change of operator give name ad address of previous operator						<u> </u>				
L DESCRIPTION OF WELL		ASE		<u> </u>					·····	
Lease Name		Well No.	Pool P	iame. Includ	ing Formation		Vied	of Lease		
Cushing 13		1			San Ar	dres		Federal or Fe		ease No.
ocation										
Unit LetterH	. 1	.980	Feet F	mm The	orth Li	e and 66	0 -		East	
							<u> </u>	et From The		Line
Section 13 Towns	hip 850	uth	Range	32_ Ea	<u>st ,n</u>	MPM,	Chave	S		County
T DESIGNATION OF TOA	NCDODT									
I. DESIGNATION OF TRA ame of Authorized Transporter of Oil		or Coade	<u>JIL AN</u>	ID NATU	RAL GAS					
Enron Oil Trading	لاً (X) د. Trans					ne address so wh Box 1188				
lame of Authorized Transporter of Cast	inghead Gas		or Dry			e address to wh		ton, 1x	77151-	1100
NONE		<u> </u>						copy of INUS J	orm 13 10 De Si	uni)
f well produces oil or liquids,	Unit	Sec.	Twp.	Ree.	ls gas actual	v connected?	When	2		
ve location of tanks.	H	<u>13</u>	85	132E	L NC)	1	-		
this production is commingled with the V. COMPLETION DATA	at from any of	her lease or	pool, gi	ve comming!	ling order num	ber:				
	<u> </u>	Oil Wel	<u> </u>	Gas Well	New Well	Workover		Dive Deat	Same Res'v	biers
Designate Type of Completion	n - (X)						Deepen	i Piug Back	Same Kes'v	Diff Res'v
late Spudded	Date Con	npl. Ready to	o Prod.		Total Depth	¥,	L	P.B.T.D.	<u>.</u>	
evations (DF, RKB, RT, GR, etc.)					T . Au	<u> </u>	• <u> </u>			
(<i>DP</i> , RAD , RI , GR , & C.)	INAME OF	Producing F	omation	ı	Top Oil/Gas	ray		Tubing Dep	ւհ	
erforations					1			Depth Casin	a Shee	
									R MINE	
		TUBING	CASI	NG AND	CEMENTI	NG RECOR	D	<u> </u>		
HOLE SIZE		SING & TI				DEPTH SET		9	SACKS CEM	ENT
······										
. TEST DATA AND REQUE	ST FOP	ALLOW	ARIE		L			L		
				oil and must	he entrol to an					
IL WELL (Test must be after ute First New Oil Run To Tank	Date of Te	al compe	5, 1000	ni unci musi	Producing M	exceed top allo shod (Flow, pu	made for this	aepin or be j	or juli 24 hou	rs.)
		-				(1 10W, PE	·γ·, διαν 191, 6	~./		
ength of Test	Tubing Pr	essure			Casing Press	ITC		Choke Size		
ctual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gas- MCF		
									<u> </u>	
GAS WELL										
ctual Prod. Test - MCF/D	Length of	Test			Bbls. Conden	mie/MMCF		Gravity of C	ondensate	
	1				j	_				
	-							Challes Class		
	Tubing Pr	essure (Shut	1-in)		Casing Press	re (Shut-in)		Choke Size		
sting Method (pilol, back pr.)					Casing Press	ire (Shut-in)		Choke Size		
sting Method (<i>pilol, back pr.</i>) I. OPERATOR CERTIFIC	CATE OF	FCOMP	LIAN	ICE		· · · · ·	SEDVA			
sting Method (pilol, back pr.) I. OPERATOR CERTIFIC I hereby certify that the rules and regu	CATE OF		PLIAN Valion			ire (Shut-in)	SERV			N
sting Method (pilol, back pr.) I. OPERATOR CERTIFIC	CATE OF	F COMP Oil Conser	PLIAN Valion		C	DIL CON				
sting Method (pilot, back pr.) I. OPERATOR CERTIFIC I hereby certify that the rules and regu Division have been complied with and is true and complete to the best of my	CATE OF alations of the t that the info knowledge a	F COMP Oil Conser	PLIAN Valion		C	· · · · ·				
sting Method (pilot, back pr.) I. OPERATOR CERTIFIC I hereby certify that the rules and regu Division have been complied with and	CATE OF alations of the t that the info knowledge a	F COMP Oil Conser	PLIAN Valion		(Date	DIL CON Approved	1			
I. OPERATOR CERTIFIC I hereby certify that the rules and regu Division have been complied with and is true and complete to the best of my <u>Babley</u> <u>Acctle</u> Signature	CATE OF alations of the t that the info knowledge a	COMP Oil Conser rmation give ad belief.	PLIAN vation en above		(Date	DIL CON Approved	1			
I. OPERATOR CERTIFIC I hereby certify that the rules and regu Division have been complied with and is true and complete to the best of my Bohly Loch	CATE OF alations of the t that the info knowledge a	F COMP Oil Conser rmatics give and belief.	PLIAN vation en above resid	lent	C Date By_	DIL CON Approvec	1 			
I. OPERATOR CERTIFIC I hereby certify that the rules and regu Division have been complied with and is true and complete to the best of my <u>Bably</u> Acctle Signature Bobby Sooter	CATE OF alations of the t that the info knowledge a	F COMP Oil Conser rmatics give and belief.	PLIAN vation en above	lent	C Date By_	DIL CON Approved	1 			

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.

- 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.

²⁾ All sections of this form must be filled out for allowable on new and recompleted wells.





Job separation sheet

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STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION	
BANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
TRANSPORTER OIL	
GAS	
OPERATOR	
PROBATION OFFICE	

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Cperstor High	Plains Oil Company	CAEDWAHEAD CAE RUST NOT MANARED RETEN
	. Box 141 Tatum, New Lexico 882	
Reason(s) for filing (Check New Well Recompletion X Change in Ownership	Change in Transporter of: Oil Dry Gas Casinghead Gas Condens	Other (Please explain) Re-entry

If change of ownership give name Laguna Petroleum Corporation - Drawer 2758 - Midland, Texas 79702-2758

II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Lease No. Lease Name State, Federal or Fee Fee 1 Chaveroo (San Andres Cushing 13 Location 660 1980 Feet From The North East Н Feet From The Line and Unit Letter Township 8 South 32 East , NMPM, Chaves County Range 13 Line of Section

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of		or Conde			Address (Give address to which	h approved copy of this form is	i to be sentj
The Permain Corport	ation	Permian	(Eff. 9 /	1 /871	P. O. Box 3119, Mi		9702
Name of Authorized Transporter of			or Dry Go		Address (Give address to which	h approved copy of this form is	; to be sent)
None							
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When	
give location of tanks.	ч Н	· 13	<u>!</u> 85	• 32E	NO		

If this production is commingled with that from any other lease or pool, give commingling order number:

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and tegulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Both Sorte	5	
President	(Signature)	
11/26/85	(Title)	
	(Date)	

	OIL CONSERVATION DIVISION
e	APPROVED DEC 5 - 1985
of	
	ORIGINAL SIGNED BY JERRY SEXTON
- [TITLE DISTRICT I SUPERVISOR
	- A HA
	This form is to be filed in compliance with RULE 1104.
- 1	to state the second for allowable for a contradiction or despended

If this is a request for allowable for a newly drilled or despend well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 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.

IV. COMPLETION DATA

Designate Type of Completie	on - (X)	OII Well X	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded 9/28/84		1. Ready to 5 10/1/84	Prod.	Total Depti	424		P.B.T.D. 43	• 80	ŧ
Elevetions (DF, RKB, RT, GR, etc.) 4439 Ground Level		Andres	mation	Top Oil/Go	s Pay		Tubing Dep		
Perforations 4273, 79, 83, 95, 99,	1-306 , :	13, 19,	36, 39, ¹	↓1 , 43			Depth Casir	ng Shoe	
			CASING, AN		NG RECOR	D	1		
HOLE SIZE	CASI	NG & TUBI	ING SIZE		DEPTH SE	т	SA	CKS CEMEN	T
12 1/4	8 5/8	320#			442			2.50	
7 7/8	4 1/2	2 10.5	, <u></u>		4424			2780	

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow-OIL WELL able for this depth or be for full 24 hours)

Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pu	Producing Method (Flow, pump, gas lift, etc.)			
10/6/84	10/8/84	Pump				
Length of Test	Tubing Pressure	Casing Pressure	Choke Size			
24 hours	0	10#	2" open			
Actual Prod. During Test	Oil-Bbie.	Water - Bbis.	Gas + MCF			
8	8	15	5			

GAS WELL

Actual Prod. Teet-MCF/D	Length of Test	Bble. Condensate/MMCF	Gravity of Condensate
Teating Method (pitol, back pr.)	Tubing Pressure (Shut-is)	Cosing Pressure (Shut-in)	Choke Size

Martin Contraction #335.47.57

RECEIVED DEC 3- 1985 O.C.D. HODES OFFICE

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