Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 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 Brazos Rd., Azzec, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

		IO IHA	NOF	OH I OIL	AND NA	UHAL GA					
Derator Comparation						Well API No.					
Murphy Operatin		30-005-20782									
P. O. Box 2545,	Roswe	ell. N	New	Mexico	8820	2-2545					
eason(s) for Filing (Check proper box)						T (Please expla	iin) `				
ew Well		Change in	-	$\overline{}$	Chana	offcat	ina A	1 1 10	92		
ecompletion	Oil		Dry C		Change	e effect:	ive Apri	1 1, 19	フム		
nange in Operator	Casinghea	d Gas 🔀	Conde	nsate 📋					·		
hange of operator give name l address of previous operator								<u> </u>			
DESCRIPTION OF WELL	AND LE	ASE									
ease Name	Well No. Pool Name, Including									ise No.	
Ingram Federal		16		Tom To	om San A	ndres	XXXXe,	ederal XXXX	K NM-	15678	
ocation		•			0 .1						
Unit LetterN	: 660 Feet From The _			rom The	South Line and 1980 Fee			t From The West Lin			
Section 5 Townshi	Section 5 Township 8 South Range 31 Ea				st , NMPM , Ch.			aves County			
000202 9 1000220										County	
. DESIGNATION OF TRAN	SPORTE			ND NATU				2.11		-	
ime of Authorized Transporter of Oil Petro Source Pa	rther	or Conden				Roy 13					
ame of Authorized Transporter of Casin		<u> </u>		y Gas [Box 13					
Fridert 16	, A	 								· - ,	
well produces oil or liquids,	Unit Sec.		Twp.		Is gas actually connected?		When	When ?			
e location of tanks.	E	5	<u> 88</u>	31E	<u> </u>						
his production is commingled with that COMPLETION DATA	from any oth	er lease or	pool, g	ive commingi	ing order num	жг					
. COMPLETION DATA		Oil Well		Gas Well	New Well	Workover	Deepen	Plug Rack	Same Res'v	Diff Res'v	
Designate Type of Completion	- (X)	1	_ i		İ						
Date Compl. Ready to Prod.					Total Depth			P.B.T.D.			
evations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas	Pav		Tak: 5			
levations (DF, RKB, RT, GR, etc.) Name of Producing Formation						· - <i>y</i>		Tubing Depth			
riorations	٠				1			Depth Casin	ng Shoe		
								<u> </u>			
TUBING, CASING AND					CEMENTI						
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
	 										
	1							 		·	
	 										
TEST DATA AND REQUE						- · · · · · · · · · · · · · · · · · · ·		•			
IL WELL (Test must be after t			of load	d oil and must	·				for full 24 hou	rs.)	
ate First New Oil Run To Tank	Date of To	est			Producing M	ethod (Flow, p	ump, gas lift, e	tc.)			
ength of Test	Tubing Pr	Tubing Pressure				ıre		Choke Size			
embet of same	Taoing 1.1	Tracing 1 teaching									
ctual Prod. During Test	1 Prod. During Test Oil - Bbls.							Gas- MCF			
GAS WELL											
ctual Prod. Test - MCF/D	Length of	Test			Bbls. Couder	sate/MMCF		Gravity of (Condensate		
esting Method (pitot, back pr.) Tubing Pressure (Shut-in)					Casing Pressure (Shut-in)			A.J., 69-			
								Choke Size			
T OPEN LOOP CORPORATE	74775 63		DI IA	NOT	1			<u> </u>			
I. OPERATOR CERTIFIC							NSERV	ATION	DIVISIO	NC	
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					Date	Approve	ed e	APR 22	2 '92		
a. a.	7					, who ove		,			
Carol XX	arce	w_			Rv	ORIGINAL	COMED B	y gasy c	EXTON		
Signature Carol J. Garcia	a, Pro	ducti	on	Analys			i dright i Su				
Printed Name	<u>, </u>		Title		11						
4/8/92	505	-622-					· · · · · · · · · · · · · · · · · · ·				
Date		Tel	lephone	No.	LI .						

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.
- Caranta Earn C 104 must be filed for each real in multiply completed wells

RECEIVED APR 2 1 1992 od Hobbs office