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

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

CONSERVATION DIVISION

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P.O. Box 2088

at Bottom of Page

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

00 Bistos Mr. Lemoni	newot Te	O TRAI	NSP(ORT OIL A	ND NATU	RAL GAS	Well A	5 [N_				
laf		<u> </u>	<u></u>				Not	Av	vailable			
Oryx Energy Company	<u> </u>											
P. O. Box 1861, Mic	iland.	Texas	7970)2			<u></u>					
P. O. BOX 1001, 1110 (coe(s) for Filing (Check proper box)					Other (Please explain)					
Well		Change in			E f f c	ective Da	ate 7	-1-9	90			
ompletion	Oil		Dry G Conde									
age in Operator X	Caninghead	1088		as Co., N	T Design	no Resour	rces Co	ompa	any, 70	60 S. Y	ale,	
age of operator give name disease of previous operatorMi	ms Texa	s Oil	& G	as Co., P	Ste	. 707, T	ulsa,	OK.	74136			
DESCRIPTION OF WELL	AND LEA	ASE					Kind	of Le	226	Lea	se Na	
e Name		M CT 140	Pool	Name, Including	Formation		State	Fode	ral or Fee	NM-046	153-A	
Miller Federal		7	1 10	m-Tom San	_					Eas	+	
ratice	•	1980	End	From The	uth Line	and56	<u>.</u> F	eet Fr	rom The	N orth	Line	
Unit Latter	_ :	19811	_ Lea	Mon the Table			Chave				County	
Section 35 Townshi	ip 7-	·S	Rang	31-E	, NM	IPM,	Chave	:5			,	
		on c	NT A	ND NATEE	PAT. GAS							
DESIGNATION OF TRAN	NSPORTE	or Coade	name	רח	Address (Give	oddress to wh	ich approv	ed cop	ry of this fo	rm is to be sen	보)	
me of Authorized Transporter of Oil Pride Pipeline Limit	ed Part			<u>ا ا</u>	Box 243	6, Abile	ene, Te	xas	79604	om is to be see		
arms of Authorized Transporter of Casis		or Dry Gas			Address (Give address to which approved to				27			
O- HOL Inc.					Box 27570, Houston, Texas 77227 ls gas actually connected? When?							
well produces oil or liquids,	Unit	Sec.	Tw	-S 31-E	Is gas access.		i					
e location of tanks. this production is commingled with the	P (777 877 6	34 ther least 0	or pool.	give comming	ing order numi	ber:						
this production is comminged with the V. COMPLETION DATA	E HOID ELY						7 2		Diva Back	Same Res'v	Diff Res'v	
		Oil W	eli	Gas Well	New Well	Workover	Deeper	. , . 	Link paor		<u>i</u>	
Designate Type of Completion	n - (X)	l	io Pro	<u> </u>	Total Depth	<u> </u>		1	P.B.T.D.		_	
ate Spudded	Date Co	Date Compl. Ready to Prod.										
evations (DF, RKB, RT, GR, etc.) Name of Producing				tion	Top Oil/Gas Pay				Tubing Depth			
evanous (DF, RRB, RF, SR, SR,									Depth Casing Shoe			
er craticas												
		TIRIN	G C	ASING AND	CEMENT	ING RECO	RD			250	4516	
		CASING & TUBING SIZE				DEPTH SET				SACKS CEMENT		
HOLE SIZE					I							
								-				
					 							
V. TEST DATA AND REQU	EST FO	RALLO	WAE	BLE	_1					. c 6.11 24 h	nage)	
V. TEST DATA AND REQU OIL WELL — (Test must be aft	er recovery	of total vol	ume of	load oil and mu	us be equal to	or exceed top a	allowable fo	or this	depth or b	e for just 24 h		
OIL WELL (Test must be aft Date First New Oil Run To Tank	Date o	Test			Producing	Method (Fiow,	pump, gas	iyi, ei	 .,			
		Tubing Pressure Oil - Bbls.			Casing Pressure				Choke Size			
Length of Test	Tubin								Gas- MCF			
Total	Oilal				Water - Bbis.				Gar Rici			
Actual Prod. During Test									<u> </u>			
CACHELL									Gavity 4	Condensate		
GAS WELL Actual Prod. Test - MCF/D	Leng	Length of Test			Bbls. Condensate/MMCF				diam'r, di			
		Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
Testing Method (pilot, back pr.)	Tubit	ng Pressure	(Snut-	ш)						·		
		OFCC) (D)	ITANCE			ONOF	יים.	ATIO	N DIVIS	SION	
VI. OPERATOR CERTI	FICATE	of the Oil (JIVIT .	ration	11	OIL C	ON2F	٦V	AHO	u Divid		
I hereby certify that the rules and Division have been complied with	hand that th	C INCHINE	ՕԱ B 1 1 6	a above					P. 2001	til)	¥	
is true and complete to the best of	f my knowk	edge and be	lief.		D	ate Appro	oved _					
11.1	D				- 11	y	. •			,	v	
Maria L.	111	\			- B	y						
Signature Maria L. Perez	Pı	oratio	on A	nalyst	- _	itle						
Printed Name	/01	15) 688	8_N 3	Title 75	T	ıtle						
7-25-90	(9)	٥٥٥ رد	Tek	ephone No.	-							
Date								_				

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