40. OF COPIES SECTIVES DESCRIBIOTROR MEM MEXICO OF CONREGAVION COMMISSION Dam C-104 SANTA FE REQUEST FOR ALLOWABLE Supersedes Old C-10\$ and C-11: FILE Effective 1-1-65 U.S.G.5. AUTHORIZATION TO TRANSPORT OIL AND RATURAL GAS TRAT TORTER OIL OPERATUR PRORATION OFFICE Contrator Robert N. Enfield P. O. Box 2431, Santa Fe, N1 87504-2431 Reason(s) for filing (Check proper box) Other (l'leuse explain) XRecompletion СП Dry 3-r. Change in Ownership Castrighend Gas Condensate If change of ownership give name and address of previous owner Devonea I. DESCRIPTION OF WELL AND LEASE Well No. Lease No. State, Federal or Fee E. McCombs Location 1650 Feet From The North Line and 990 Unit Letter Feet From The West Township 7 South Line of Section 29 Range 31 East , NMPM, Chaves County I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Andress (Give address to which approved copy of this form is to be sent) Pride Pineline Company Name of Authorized Transporter of Casinghead Gas or Dry Gas X P. O. Box 2436, Abilene, TX 79601 Address (Give address to which approved copy of this form is to be sent) P. O. Box 300, Tulsa, OK 74102 Oxy USA Inc. Twp. P.ge. Unit Sec. Is gas actually connected? When If well produces oil or liquids, give location of tanks. 5-19-88 75 Е 29 31E No yes approximately 4/10/38 If this production is commingled with that from any other lease or pool, give commingling order numbers V. COMPLETION DATA Gas Well New Well Same Resty, Dill, Resty. Oil Well Workever Deepen Plua Back Designate Type of Completion - (X) Date Spudded Date Compl. Ready to Prod. P.B.T.D. 1/22/88 3/30/88 9182' 8610' Elevations (DF, RKB, RT, GR, etc., Name of Producing Formation Top CII/Gas Pay Tubing Depth 4319 KB Devonian 84771 8402.06 Depth Casing Shoe 8477' - 8551' (18 holes) 8414.06 TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE DEPTH SET HOLE SIZE 17-1/2 13-3/8" 455 **'** 475 Cl C, Cir 100 sx 8-5/8" 12-1/4" 3500' 1250 Sx Halco _Lite + 25 4-1/2" 9132' 730 sx7-7/8" 2-3/8" 8402.06 (Test must be after recovery 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 Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Casing Pressure Choke Size Tubing Pressure Length of Test Gus - MCF Water - Bbls. Oli-Bbis. Actual Pred, During Test GAS WELL

Actual Prod. Test-MCF/D Length of Test Bbis. Condensate/MMCF Gravity of Condensate 20 MCF/BBL 24 hrs. Casing Pressure (Shut-in) Cheke Size Tubing Presewe (Shut-in) Testing Method (pitot, back pr.) 3062 packer 0 (packer) 14/64"

I. CERTIFICATE OF COMPLIANCE

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

Robert	h. Inters	2
	· (Stenature)	
Robert N. Er	nfield - Operato	r

Dusel

April 27, 1988

(Title)

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

OIL CONSERVATION COMMISSION

ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR

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AUG 1 4 to

If this is a request for allowable for a newly drilled or despened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allow-sble on new and recompleted wells.

Fill out only Sections I. II. III, and VI for changes of owner, ell name or number, or transport nor other such change of condition.

Separate Forms C-104 must be first for each pool in multiply empleted wells.

APPROVED_