

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator REMUDA OPERATING COMPANY	Well API No. 30-005-21110
Address 301 N. Colorado Ste 150 Midland, Tx 79701	
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> Change in Transporter of: Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator <input type="checkbox"/> Casinghead Gas <input checked="" type="checkbox"/> Condensate <input type="checkbox"/> Other (Please explain) <input type="checkbox"/>	
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name New Mexico "J" State	Well No. 3	Pool Name, Including Formation Cato (san Andres)	Kind of Lease State, Federal or Fee <input checked="" type="checkbox"/>	Lease No. k-3259
Location Unit Letter E : 1980 Feet From The North Line and 660 Feet From The West Line Section 36 Township 7S Range 30E , NMPM , Chaves County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Enron Oil Trading & Transportation Corp Effective 1-1-93	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1188 Houston, Tx 77251-1188	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Trident NGL	Address (Give address to which approved copy of this form is to be sent)	
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 36
	Twp. 7S	Rge. 30E
	Is gas actually connected? No When? 7/25/92	

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 4/27/92	Date Compl. Ready to Prod. 5/17/92		Total Depth 3750		P.B.T.D. 3699			
Elevations (DF, RKB, RT, GR, etc.) 4192.8 Gr	Name of Producing Formation San Andres		Top Oil/Gas Pay 3561		Tubing Depth 3679			
Perforations 3561-3692 16 Holes					Depth Casing Shoe 3750			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 12 1/4	CASING & TUBING SIZE 8 5/8"		DEPTH SET 330		SACKS CEMENT 225			
7 7/8"	4 1/2		3750		400			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL

(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.)


Date First New Oil Run To Tank 6/03/92	Date of Test 5/25/92	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24hrs	Tubing Pressure 30	Casing Pressure 30	Choke Size -
Actual Prod. During Test	Oil - Bbls. 20	Water - Bbls. 35	Gas - MCF 30

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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

Signature 
Printed Name **John Aylesworth** Agent
Date **6/23/92** Telephone No. **915-684-8003**

OIL CONSERVATION DIVISION

Date Approved **6/23/92**

By **ORIGINAL SIGNED BY JERRY SEXTON**

Title

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.