

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Format 06-01-83
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| FILE | | |
| U.S.G.S. | | |
| LAND OFFICE | | |
| TRANSPORTER | OIL | |
| | GAS | |
| OPERATOR | | |
| PRORATION OFFICE | | |

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
American Trading & Production Corporation

Address
110 W. Louisiana, Suite 300; Midland, Texas 79701

Reason(s) for filing (Check proper box)
☒ New Well
☐ Recompletion
☐ Change in Ownership

Change in Transporter of:
☐ Oil
☐ Casinghead Gas
☐ Dry Gas
☐ Condensate

Other (Please explain)
CASINGHEAD GAS MUST NOT BE
FILED AS OF 12-1-86
OTHER INFORMATION TO R-400
IS OBTAINED.

If change of ownership give name
and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|---------------|---|--|------------------|
| Lease Name Coy Lowe | Well No. 1 | Pool Name, Including Formation Gladiola, S. (Wolfcamp) | Kind of Lease State, Federal or Fee | Lease No. Fee |
| Location Unit Letter <u>E</u> : <u>500</u> Feet From The <u>West</u> Line and <u>1650</u> Feet From The <u>North</u> Line of Section <u>7</u> Township <u>13-S</u> Range <u>38-E</u> , NMPM, <u>Lea</u> 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"/> JM Petroleum | Address (Give address to which approved copy of this form is to be sent) 2000 N. Tower, Plaza of Americas Bldg. Dallas, Texas 75207 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> | 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 E | Sec. 7 | Twp. 13-S | Rge. 38-E | Is gas actually connected? No - TSTM | When |

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 regulations 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.

Donald H. Coy
(Signature)
District Engineer
(Title)
10-3-86
(Date)

OIL CONSERVATION DIVISION

APPROVED 3073 1986, 19____
BY Orig. Signed by
Paul J. Smith
TITLE Geologist

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

If this is a request for allowable for a newly drilled or deepened 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 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

| IV. COMPLETION DATA | | | | | | | | | |
|--|--|--|----------|-------------------------|----------|--------|-----------------------------|-------------|--------------|
| Designate Type of Completion - (X) | | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v. | Diff. Res'v. |
| | | X | | X | | | | | |
| Date Spudded 6-20-86 | | Date Compl. Ready to Prod. 9-29-86 | | Total Depth 12,800 | | | P.B.T.D. 9865 | | |
| Elevations (DF, RKB, RT, GR, etc.), 3849 GR | | Name of Producing Formation. Wolfcamp | | Top Oil/Gas Pay 9180 | | | Tubing Depth 9750 | | |
| Perforations 9700-9706 | | | | | | | Depth Casing Shoe 12,412 | | |

TUBING, CASING, AND CEMENTING RECORD

| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
|-----------|----------------------|-----------|-------------------|
| 17 1/2" | 13 3/8" 54.5 ppf | 382' | 400 sx "C" |
| 12 1/4" | 8 5/8" 24 & 32 ppf | 4550' | 2080 sx lite |
| 7 7/8" | 5 1/2" 17 & 20 ppf | 12412' | 1000 sx 50/50 poz |
| | 2 7/8" 6.5 ppf | 9750' | |

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 allowable for this depth or be for full 24 hours)

| | | | |
|--|-------------------------|---|-----------------|
| Date First New Oil Run To Tanks 9-29-86 | Date of Test 10-2-86 | Producing Method (Flow, pump, gas lift, etc.) Pump | |
| Length of Test 24 hrs. | Tubing Pressure 30 | Casing Pressure 30 | Choke Size - |
| Actual Prod. During Test | Oil-Bbls. 10 | Water-Bbls. 60 | Gas-MCF TSTM |

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 |

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