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., Aztec, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Operator											Well API No.					
EP Operating Limited Partnership											30-041-70556					
Address												<u> </u>				
6 Desta Drive, Suite 5	250, Mi	idland	, T	'X	797	05-	-5510									
Reason(s) for Filing (Check proper box)								Othe	et (Please expl	ain)					_	
New Well		Change in	Tra	nspo	rter of:											
Recompletion	Oil		Dry	/ Ga	ıs [
Change in Operator	Casinghea	d Gas 🔲	Cor	nden	ısate [
If change of operator give name and address of previous operatorE	P Opera	ating (Com	ра	ny (San	ne Add:	re	ss)							
II. DESCRIPTION OF WELL	AND LEA	ASE														
Lease Name		Well No.		Pool Name, Including								of Lease		Lease No.		
Finley		l Peterson M					Mississippian :				KState: Federalise: Fee			*****		
Location A	660)				ŀ	Vorth		66	50			East			
Unit LetterA	- :	<u> </u>	_ Fee	t Fr	om The	· —	1	Line	e and66		Fe	et From The	- Labe	Line		
Section 6 Township	5 S		Rar	nge	3	3E		NN	ирм,	Roos	eve	1t		County		
III. DESIGNATION OF TRAN	SPORTE				D NA	TUI	RAL GA	S					عد وجند			
Name of Authorized Transporter of Oil X or Condensate							Address (Give address to which approved copy of this form is to be sent)									
Phillips Petroleum Company- Trucks							4001 Penbrook, Odessa, TX 79763 Address (Give address to which approved copy of this form is									
Name of Authorized Transporter of Casing		$\square X$	or I	Dry 1	Gas 🗌		6									
Transwestern Pipeline		7	·										,Odessa	TX 797	61	
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Tw	-	:	_	ls gas actu	ıaliy	connected?	ļ	When					
	_A	6		S	33			Ye:				9/22/8:	<u> </u>			
If this production is commingled with that if IV. COMPLETION DATA	rom any oth	er lease or	pool,	giv	e comn	ningli	ing order na	umb	er:							
IV. COMPLETION DATA		102.22.2					1	 1				1	10	<u> </u>		
Designate Type of Completion	· (X)	Oil Well		(Gas Wei	וו	New We	II: 	Workover	Dec	pen	Plug Back	Same Res'v	Diff Res'v		
Date Spudded	Date Comp	l. Ready to	Pro	d.			Total Dep	uh Lh		<u> </u>		P.B.T.D.	I	1	_	
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formati					nation			Top Oil/Gas Pay				Tubing Depth				
Perforations					!						Depth Casing Shoe					
												•	Ü			
	T	UBING.	CA	SIN	NG A	VD.	CEMEN'	TTN	NG RECOR	D		 			T	
HOLE SIZE	CASING & TUBING SIZE						DEPTH SET					SACKS CEME	ENT	\exists		
													······································			
							·····						·····		\neg	
V. TEST DATA AND REQUES	T FOR A	LLOWA	ABL	Æ					<u>-</u> :						_	
OIL WELL (Test must be after re	covery of tol	tal volume	of lo	ad o	il and r	nust i							for full 24 hour	·s.)		
Date First New Oil Run To Tank	Date of Tes	t					Producing	Mei	thod (Flow, pu	mp, ga	s lift, e	tc.)				
									10 1 0			_				
Length of Test	Tubing Pres	sure					Casing Pressure				Choke Size					
Actual Prod. During Test	Oil Divi						Water - Bbls.					Gas- MCF				
Actual Frod. During Test	Oil - Bois.	Oil - Bbls.						Water - Bois.								
GAS WELL												1				
Actual Prod. Test - MCF/D	Length of T	est					Bbls. Cond	iens	sate/MMCF			Gravity of C	Condensate		\neg	
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in)							Casing Pressure (Shut-in)					Choke Size				
VI. OPERATOR CERTIFICA	ATE OF	COMP	LL	٨N	CE		1	_								
I hereby certify that the rules and regulations of the Oil Conservation								C	OIL CON	ISE	RV	NOITA	DIVISIO	N		
Division have been complied with and that the information given above																
is true and complete to the best of my knowledge and belief.							Da	tρ	Approve	Н		DI	EC 22'9	2		
J. 171.									pp. 0 t 0 t						_	
V KMaix Alish							By ORIGINAL SIGNED BY JERRY SEXTON									
Signature Leonard Versh District Production Manager							By ORIGINAL SIGNED BY JERRY SEXTON DISTRIGT I SUPERVISOR									
Leonard Kefsh, District Production Manager Printed Name 12/17/92 (915) 682-9756											~N V (3\)	`				
12/17/92	(915)	682-9	975	6			Titl	e_							—	
Date		Tele	phon	e No	o.	-										
							•									

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.