HO, OF COPIES & CKIVIO SANTA FE FILE U.S.G.S.

NEW MEXICO OIL CONSCRVATION COM. HOL REQUEST FOR ALLOWABLE ΠΛ

AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

fbim C+104 Supersed&\$ Cld C-104 and C-114 Uffoctive [-]-65

| LAND OFFICE | | ~ | | | | |
|--|--|--|--|--|--|--|
| TRANSFORTER OIL | | | | | | |
| OPERATOR ORATION OFFICE | | | | | | |
| tor | lCo, Inc. | | | | | |
| MOTUI | .TCO, THC. | | | | | |
| . P.O. | | New Mexico 88210 Other (Please explain) | - I mark Allowable | | | |
| leason(s) for filing (Check proper box) | Change in Transporter of: | i | Request Test Allowable to move oil from tank | | | |
| New Well Recompletion | Oi, Dry Gas | on location. | co move off from came | | | |
| Change in Ownership | Casinghead Gas Condens | die OII TOCACTOII. | | | | |
| change of ownership give name | | | | | | |
| nd address of previous owner | | | | | | |
| ESCUPTION OF WELL AND I | EASE. | matten Kind of L | ease Lease No. | | | |
| Legse Name | Well No. Pool Name, Including For | | NOCK N Fee | | | |
| Robin son Fee | | • | | | | |
| Location B . 660 | Feet From The North Line | and 2310 Feet F | rom The East | | | |
| Unit Letter | | 32E , NMPM, | Roosevelt county | | | |
| Line of Section 19 Tow | mship 7S Range | , MMPM, | | | | |
| PROTONATION OF TRANSPORT | ER OF OIL AND NATURAL GAS | 3 | description form is to be sent! | | | |
| Name of Authorized Transporter of Oil | of Condensate | | pproved copy of this form is to be sent) Artesia N M. 88210 | | | |
| Navajo Crude Oil Pu | rchasing Co. | P.O. Drawer 175. Artesia. N.M. 88210 Address (Give address to which approved copy of this form is to be sent) | | | | |
| Name of Authorized Transporter of Cas | inghead Gas Group Gas Group | 1 | | | | |
| | Unit B Sec. 19 Twp. 7 Pge32 | Is gas actually connected? | When | | | |
| if well produces oil or liquida, give location of tanks. | | | 1 | | | |
| Cable production is commingled wit | th that from any other lease or pool, | give commingling order number | | | | |
| COMPLETION DATA | Oil Well Gas Weil | New Well Workover Deepe | | | | |
| Designate Type of Completic | | | 1 | | | |
| Date Spudded | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. | | | |
| 7-21-82 | | Top Oil/Gas Pay | Tubing Depth | | | |
| Elevations (DF, RKB, RT, GR, etc.) 4280 GR | Name of Producing Formation San Andres | 4032 | 4029 | | | |
| Perforations | | | Depth Casing Shoo | | | |
| 4032-4058 | | 27.000 | | | | |
| | | CEMENTING RECORD | SACKS CEMENT | | | |
| HOLE SIZE | CASING & TUBING SIZE | 1741 | 650sx.Class C HOWCO | | | |
| 11 | 8 3 3 | | Lite, 250sx.Class C | | | |
| | | 1005 | Cement Circ 100sx | | | |
| 7 7/8 | 4 1 '2 | 4285 | id oil and must be equal to or exceed top allows | | | |
| TEST DATA AND REQUEST F | OR ALLOWABLE (Test must be a) able for this de | THE A CI DE JOH JOHN IN THE PARTY | | | | |
| Oll, WEIL Date First New Oil Run To Tanks | Date of Test | Preducing Method (Flow, pump, | gas lift, etc.) | | | |
| Late First New Otto | | Casing Pressure | Choke Size | | | |
| Length of Test | Tubir q Preseure | Castud Liesenza | | | | |
| Tool | Oil-lible. | Water-Bbls. | Gae-MCF | | | |
| Actual Prod. During Test | | | | | | |
| | | | | | | |
| GAS WELL | Tool Control | Bbls. Condensate/MMCF | Gravity of Condensate | | | |
| Actual Frod. Test-MCF/D | Length of Test | | | | | |
| Testing Method (pitos, back pr.) | Tubing Pressure (Shuk-in) | Casing Pressure (Shut-in) | Choke Size | | | |
| | | 2016 | ERVATION COMMISSION | | | |
| CERTIFICATE OF COMPLIAN | CE | OIL CONSE | 1 1082 | | | |
| | | APPROVED FEB 2 | 1 1982 | | | |
| hereby cortify that the rules and | regulations of the Oil Conservation with and that the information given hast of my knowledge and belief. | and the second s | | | | |
| above is true and complete to the | ne best of my knowledge and belief. | BYORIGINALS | | | | |
| | | TITLE | 1 CUDD | | | |
| A I A no | 1 | | od in compliance with RULE 1104. | | | |
| Carl H | organ | well, this form must be so | If this is a request for allowable for a newly delle i or despensed if this form must be accompanied by a tabulation of the deviation well, this form must be accompanied by a tabulation of the deviation well, this form the well in accordance with RULE, it. | | | |
| (Sie | nation | | | | | |
| 119. | (ille) | | All acctions of this form must be filled out completely for silver ship on now and recompleted wells. | | | |
| 2-15-82 | | | in I, II, and VI for changes of owner maporter, or other such change of condition | | | |
| 2-17-03 | Dute) | Woll name or humovi, of the | • | | | |

(Date)



DRILLING CO., INC. - DIL WELL DRILLING CONTRACTORS

P. D. 80x 1498 ROSWELL, NEW MEXICO 88201 TELEPHONES: ARTESIA 505/746-6757 ROSWELL 505/623-5070

July 29, 1981

MorOilCo P.O. Box 1 Artesia, NM 88210

Re: Robinson Fee #1

Gentlemen:

The following is a Deviation Survey of the above well located in Roosevelt County, New Mexico.

| | | 1/20 | 26871 | | 1/20 | |
|-------|---|------|---------------|---|------|------|
| 975 1 | | | 3185* | - | 1/20 | |
| 14721 | | | 3679 ' | | 1/2° | |
| 1760' | | | 4145' | | | |
| 21941 | - | 1/20 | 4285' | | 1/20 | T.D. |

Yours very truly,

WELLING, CO., INC.

Arnold Newkirk

| STATE OF NEW MEXICO |) |
|--------------------------------|---|
| |) |
| COUNTY OF CHAVES |) |
| The foregoing was of July 1981 | acknowledged before me this 29th day by Arnold Newkirk. |
| My Commission Expires | : Elessa Eileen Deck |
| 4/12/85 | Notary Public |