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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

## DISTRICT II P.O. Drawer DD, Anesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION I. TO TRANSPORT OIL AND NATURAL GAS Operator Well API No. 300250067099 The Wiser Oil Company Address 8115 Preston Rd., Suite 400, Dallas, TX 75225 Reason(s) for Filing (Check proper box) Other (Please explain) New Well Change in Transporter of: Recompletion Dry Gas Oil X Change in Operator Casinghead Gas Condensate Effective 1-1-93 If change of operator give name and address of previous operator Southwest Royalties, Inc. Box 953, Midland, TX 79702 II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Leave Lease No Johns A 24 DE Maljamar GB-SA See, Federal of NMLC030437A Location \_ Line and \_660 660 M Feet From The S Unit Lener Feet From The Line Township 17S Range 32E NMPM. Lea County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent) X Texas NM Pipeline Hobbs, NM Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be seri) NONE If well produces oil or liquids, Unit Twp. 175 Sec Rge. 32E is gas actually connected? When? give location of tanks. 24 If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Oil Well Gas Well New Well | Workover Deepen | Plug Back | Same Res'v Designate Type of Completion - (X) Date Spudded Date Compl. Ready to Prod. Total Depth PRTD Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Too Oil/Gas Pav Tubing Depth Perforations Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 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 Date of Test Producing Method (Flow, pump, gas lift, etc.) Length of Test Tubing Pressure Casing Pressure Choke Size Actual Prod. During Test Oil - Bbls. Water - Bbls Gas- MCF **GAS WELL** Actual Prod. Test - MCF/D Length of Test Bbls. Condensue/MMCF Gravity of Condensate Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION 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.

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

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KO.

Signature Perin

Printed Name

Date

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

By.

Title

Date Approved \_

Paul Kents

Geologis

- 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.

HGGSI

748-3352

Telephone No.

4) Separate Form C-104 must be filed for each pool in multiply completed wells.