	State of New Mexico Energy, Minerals and Natural Resources Department							Form C-104 Revised 1-1-89 See Instructions at Bottors of Page			
P.O. Box 1980, Hobbs, NM 88240 <u>DISTRICT II</u> P.O. Drawer DD, Artesia, NM 88210	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088						ł				
DISTRICT UI 1000 Rio Brazos Rd., Azzec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION L TO TRANSPORT OIL AND NATURAL GAS											
Operator THE V	WISER OIL COMPANY						3002501481 V				
Address 8115	PRESTON	ROAD	- Su	ite 40	0 - DAL	LAS, TX	75225				
Reason(s) for Filing (Check proper box)	· · · ·					(Please explai	Ŷ				
New Well Recompletion Change in Operator X	Change in Transporter of: Oil Dry Gas Casinghead Gas Condensate							EFFECTIVE 9-15-92			
If change of operator give same and address of previous operator PENN	ZOIL EXP	LORAT	10N 8	PROD	<u>co. –</u>	P.O. BOX	8850 -	MIDLAND	<u>, TX 797</u>	08-8850	
IL DESCRIPTION OF WELL A Lesse Name Phillips B State	ND LEASE Well No. Pool Name, Including Formation 7 Maljamar Grayburg SanAndr						Dan E	Kind of Lease No. State, Federal or Fre. State 2149			
Location Unit LetterJ	:198	<u>30 </u>	Feet Proc	n The So	uth_Line	and198	0 F oc	t From The _	East	Line	
Section 19 Township	17_	<u>S</u> 1	Range	33	<u>E , N</u>	/PM,	Le	<u>a</u>		County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Image: Constraint of Oil NONE - Injection Well Name of Authorized Transporter of Casinghead Gas Image: Constraint of Oil Name of Authorized Transporter of Casinghead Gas Image: Constraint of Oil											
NONE If well produces oil or liquids,	ghead Gas X or Dry Gas Address (Give address to we Unit Sec. Twp. Rgs. Is gas actually connected?						When ?				
give location of tanks. If this production is commingled with that i	from any other	lease of p	ool, give	commingli	No	ber:					
IV. COMPLETION DATA		Oil Well		at Well		Warkover	Deepen	Phug Back	Same Res'v	Diff Res'v	
Designate Type of Completion Date Spudded			1		Total Depth	İ		P.B.T.D.		i	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas	Top Oil/Gas Pay			Tubing Depth		
Performions	Depth Casing Shoe									·	
HOLE SIZE	TUBING, CASING AND CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
V. TEST DATA AND REQUE OIL WELL (Test must be after	ST FOR AI	LLOW/	ABLE of load a	oil and mus	be equal to a	r exceed top all	owable for this	s depth or be	for full 24 hou		
Date First New Oil Run To Tank						Producing Method (Flow, pump, gas lift, e			Choke Size		
Length of Test	Tubing Pressure				Casing Pressure						
Actual Prod. During Test	Oil - Bble.				Water - Bbis.			Gas- MCF			
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 Pres	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.					Dat	OIL CONSERVATION DIVISION Date Approved NOV 0 3 '92					
Signature RICHARD STARKEY - SECRETARY Printed Name Title						By ORIGINAL SIGNED BY JERRY SEXTON' TitleDISTRICT I SUPERVISOR					
September 15, 1992 214-265-0080 Dete Telephone No.											

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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.

All sections of this form must be filled out for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
Separate Form C-104 must be filed for each pool in multiply completed wells.