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Appropriate District Office
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1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

I.

Operator Polaris Production Corp.	Well API No. 30-025-05262
Address P. O. Box 1749, Midland, Texas 79702	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of operator give name and address of previous operator Cancel Denton Deviation allow.

II. DESCRIPTION OF WELL AND LEASE

Lease Name Argo	Well No. 1	Pool Name, including Formation Denton Wolfcamp	Kind of Lease State, Federal or Fee	Lease No. Fee
Location Unit Letter A : 660 Feet From The East Line and 660 Feet From The North Line Section 3 Township 15-S Range 37-E , NMPM, Lea 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"/> Amoco Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 702068, Tulsa, OK 74170-2068					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> J. L. Davis	Address (Give address to which approved copy of this form is to be sent) 211 North Colorado, Midland, TX 79701					
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 3	Twp. 15-S	Rge. 37-E	Is gas actually connected? Yes	When? Unknown

If this production is commingled with that from any other lease or pool, give commingling order number:

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 8-15-90	Date Compl. Ready to Prod. 8-16-90		Total Depth 12,690		P.B.T.D. 12,100			
Elevations (DF, RKB, RT, GR, etc.) 3823 DF	Name of Producing Formation Wolfcamp		Top Oil/Gas Pay 9280'		Tubing Depth 9100'			
Perforations 9280-9500'					Depth Casing Shoe ---			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		374'		325 sacks			
11"	8 5/8"		4655'		3500 sacks			
7 7/8"	5 1/2"		12,500'		1150 sacks			

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 8-16-90	Date of Test 8-16-90	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure ---	Casing Pressure ---	Choke Size ---
Actual Prod. During Test	Oil - Bbls. 25	Water - Bbls. 250	Gas- MCF 12

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

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.

Davis Payne
Signature
Davis Payne
Printed Name
9-24-90
Date
(915) 684-8248
Telephone No.
President
Title

OIL CONSERVATION DIVISION

Date Approved **SEP 25 1990**
By **ORIGINAL SIGNED BY JERRY SEXTON**
Title _____

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.

