STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTE			
SANTA FE			
FILE			
U.S.G.S.	I		
LAND OFFICE			
TRANSPORTER			
, , , , , , , , , , , , , , , , , , ,	GAS		
OPERATOR			
PROBATION OF	Т		

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

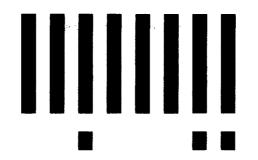
Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

THOMAT DO GIVE T	AUTHORIZATION TO TRANSP	ORT OIL AND NATORAL SAS			
Operator Rice Engineering Corp	poration				
Address 122 W. Taylor, Hobbs	, New Mexico 88240				
Reason(s) for filing (Check proper box) New Well Recompletion Change in Ownership	Casinghead Gas Con	Other (Please explain) Gas ndensate			
If change of ownership give name in the same in the sa	Engineering & Ope	rating, Inc., 122 W. T	Caylor, Hobbs, N.M.		
II. DESCRIPTION OF WELL AND L Lease Name Abo SWD "F" Location F 2310	31 Lovington Ab	ormation Kind of Lease State, Federal or	F•• State - west		
Unit Letter	140	37E , NMPM,	Lea County		
Name of Authorized Transporter of Caeings Name of Authorized Transporter of Caeings If well produces oil or liquids, qive location of tanks.	head Gas or Dry Gas on the state of the stat	Address (Give address to which approved Is gas actually connected?	į		
If this production is commingled with t		give commingling order number:			
NOTE: Complete Parts IV and V on reverse side if necessary. VI. 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 is true and complete to the best of my knowledge and belief. OIL CONSERVATION DIVISION APPROVED JUN 1 2 1985 BY ORIGINAL SIGNED BY JERRY SEXTON					
L. B. Goodheart Signature Division Manager	und	This form is to be filed in co. If this is a request for allowal well, this form must be accompanitests taken on the well in accords. All sections of this form must	ble for a newly drilled or deepened ed by a tabulation of the deviation ance with RULE 111. be filled out completely for allow-		
(Title) March 28, 1985 (Date) able on new and recompleted wells. Fill out only Sections I. II. III. and VI for changes of owner well name or number, or transporter, or other such change of condition Separate Forms C-104 must be filed for each pool in multiple completed wells.					

IV. COMPLETION DATA		• .							
Designate Type of Comple	tion – (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Restv.	Diff. Restv
Date Spudded	Date Compl	. Ready to F	Prod.	Total Depth		_ <u></u>	P.B.T.D.	<u></u>	<u> </u>
Elevations (DF, RKB, RT, GR, etc.,	Name of Pro	oducing Form	motion	Top Oil/Ga	s Pay		Tubing Dep	th	······································
Perforations							Depth Casir	g Shoe	
		TUBING,	CASING, AN	CEMENTIN	IG RECORE)			
HOLE SIZE	CASIN	G & TUBI		1	DEPTH SE		SA	CKS CEMEN	(T
									
							1		
V. TEST DATA AND REQUEST OIL WELL	r for allo	WABLE (7	Test must be a able for this de	fter recovery of pth or be for f	f total volum	of load oil	and must be eq	ual to or exce	ed top allow
Date First New Oil Run To Tanks	Date of Test				ethod (Flow,	pump, gas li	ift, etc.)		
Length of Test	Tubing Pres	EWe	·	Casing Pres	eure :		Choke Size	-	
Actual Prod. During Test	Oil-Bhis.			Water - Bbls.	-		Gas+MCF		<u>-</u>
AS WELL						·			
Actual Prod. Test-MCF/D	Length of Te	et		Bbis. Conder	neate/MMCF		Cravity of Co	ondenagte	· · · · · · · · ·
Testing Method (pirot, back pr.)	Tubing Press				we (Shut-i		Choke Size		

APR -1 1985







Job separation sheet

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STATE OF NEW MEXICO JERGY AND MINITALS DEPARTMENT

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LAND DEFICE	1		
THAMEPUNTEN -	!	!	!
GAS	l_	l	ŀ
OPERATOR.	-	!	İ
TROPATION OFFICE	1	1	

OIL CONSERVATION DIVISION

١.		Р. О. ВОЭ	X 2088			
.	DISTRIBUTION	SANTA FE, NEW				
	FILE					
L.	LANG OFFICE	REQUEST FOR	ALLOWABLE			
1	THANEPUNTEN OIL	AN	ID .			
-	OPERATOR.	AUTHORIZATION TO TRANSP	ORT OIL AND NATURAL GAS			
* • •	PROMATION OFFICE					
- 1	Rice Engineering	g & Operating, Inc.				
	Address		- 4 -			
- 1	122 W. Taylor,	Hobbs, New Mexico 882	Other (Piease explain)			
ŀ	Reason(s) for filing (Check proper box)	Change in Transporter of:	Change in lease	e name only		
- 1	New Well	Oil Dry Gas	[·]			
1	Recompletion Change in Ownership	Casinghead Gas Condens	*at•			
L_						
1	change of ownership give name nd address of previous owner					
11. [DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo	rmation Kind of Lease	Lease :		
	bo SWD "F"	31 Lovington Abo	o WC-Penn State, Federal	or F. State -		
1-	Location					
	Unit Letter F : 2310	Feet From The north Line	and 2626 Feet From Th	• west		
		whin 16C Range	37E , NMPM,	Lea County		
Ĺ	Line of Section 31 To	iship 16S Range	37.12			
:11 1	DESIGNATION OF TRANSPORT	ER OF OIL AND NATURAL GAS	S Address (Give address to which approve	d copy of this form is to be sent)		
ſ	Nome of Authorized Transporter of Cil	cr Condensate	Andress (Give daures) to which opposit			
	Name of Authorized Transporter of Cas	inchead Gas cr Dry Gas	Address (Give address to which approve	d copy of this form is to be sent)		
Ì	Hame of Authorized Transporter of Cas					
}.	If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connected? When	1		
1	give location of tanks.		<u> </u>	-		
1	If this production is commingled wit	h that from any other lease or pool,	give commingling order number:			
TV.	COMPLETION DATA	Oil Well Gas Well	New Well Workever Deepen	Plug Back Same Hest. Diff. New		
	Designate Type of Completio	n = (X)		l		
}	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
			Top Oil/Gas Pay	Tubing Depth		
	Elevations (DF, RKB, RT, GR, etc.)	Mame of Producing Formation	100 011/033 1 0/			
1				Depth Casing Shoe		
	Perforations					
ŀ			CEMENTING RECORD	SACKS CEMENT		
Ì	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET			
[
1			1			
ξ, η,	TEST DATA AND REQUEST FO	OR ALLOWABLE (Test must be o	fter recovery of total volume of load oil a pth or be for full 24 hours)	and must be equal to or exceed top div		
	OH. WELL	Date of Test	Producing Method (Flow, pump, gas H)	t, etc.)		
	Dute First New Oil Run To Tanks	150.8 61				
}	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
İ			Water-Ebis.	Gas-MCF		
Ì	Actual Prod. During Test	Oil-Bbis.	Hales - Day			
l						
	GAS WELL			Gravity of Condensate		
1	Actual Frod, Test-MCF/D	Length of Test	Bble. Condensate/NUACF	Gravity of Concentrate		
			Cosing Pressure (Chut-in)	Choke Size		
Ī	Testing Mathed (pitot, back pr.)	Tubing Pressue (Shut-in)				
Į			DIL CONSERVAT	ION DIVISION		
. ,1.	CERTIFICATE OF COMPLIAN	∪ E.	Alig 7	1981		
		regulations of the Oil Conservation				
	Division have been complete with	and that the information given best of my knewledge and belief.	Orse Signed by BY Jorry Section			
	above is true and complete to the	bear of my water a	TITLE Dies L. Super			
) \(\)	1 0	ill L!			
	1	11		compliance with reduce 1112, cable for a newly dilled or despec- ated by a tabulation of the deviati		
	2.1.100	Will be a second	well, this form must be at compe	dance with BULE 111.		
•	L. B. Goodheart (Sien	are ex	toste taken on the worlding action	at he filled out completely for allo		
	Division Manager	are an experimental transfer and the constant of the property of the $\mathcal{L}(\mathcal{L})$	appe on new thu recompleted at	the changes of own.		
	· · · · · · · · · · · · · · · · · · ·		Fift out only Sections I. I	t. III, and VI for changes of own-		
	August 4, 1981	(i.a)	Granista Firms C-104 mus	t he filed for each pool in multi-		
			The same of the sa			