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Appropriate District Office
DISTRICT I
P.G. Box 1980, Hobbs, NM 88240

## State of New Mexico Energy, Minerals and Natural Resources Department

## DISTRICT II

OIL CONSERVATION DIVISION P.O. Box 2083 FOR STREET III FOR DRIVER SALE, NAM 8210 SAILE FR, New Mexice 87504-2088 RECUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL. AND NATURAL GAS WOLATINE. N. A. MONCRIEF, JR. Address MONCREEF BUILDING, RENTH 8 COMMERCE, FORT WORTH, FEXAS 7-6102 REMONOR FRIET Clause proper for IN REMONOR FRIET CLAUSE PROPERTY PROPERT	P.G. Box 1980, Hobbs, NM 88240	OII (	CONCEDU	ATION I	DIVISIO	Ν .	_	<b>a.</b> D.		
DESCRIPTION OF WELL AND LEASE   Lase Name of schools of Designated One   Description of Description Description of Description of Description of Description of Descripti	DISTRICT II P.O. Drawer DD, Artesia, NM 88210	lox 2088		•	•					
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Remotion for Filling (Check proper lear)   Change in Transporter of   Change in Transporter of   Change in Open   Change in	Address		700	TIODMII III		102				
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Consignated Comprehensive Consignated Gas Condensate Co		Change	in Transporter of	cha	nge lear	e name	from State	:#1 h	place 26	
Consignated Comprehensive Consignated Gas Condensate Co		· · · · · · · · · · · · · · · · · · ·		CHAN	GE" EFFEC'	rive 1-)	91			
Lease Name STATE R6 Lossion 1 Vest Inches Name STATE R6 Lossion 1		Casinghead Gas	Condensate							
Lease Name   Veril No.   Proc. Names, Including Foremistion   Succession   Lease Name   Lease Name   Names	If change of operator give name									
Lease Name   Veril No.   Proc. Names, Including Foremistion   Succession   Lease Name   Lease Name   Names	II. DESCRIPTION OF WELL	AND LEASE				Visto	f I area	La	ase No.	
Location    Line and   Gold   Food From The   WEST   Line		1		ng romanou State I						
Unit Letter   E   1980   Feet From The   NORTH   Lase and   661   Feet From The   WE51   Lase		1	KEMNITZ	LOWER WO	LFCAMP					
Section 26   Township 16S   Range 33E   NMTM, LEA   Country	<u> </u>	1980	The I	ORTH Lin	end 66	1 Fe	et From The	WEST	Line	
Section   26   Township   16S   Rage   33E   NAPA, LEAN	Unit Letter	_ :	Peet Prom The _						County	
Name of Authorized Trassporter of Oil XX or Condensate	Section 26 Townsh	i <b>p</b> 165	Range 33E	, <u>N</u>	MPM,	LEA			County	
Name of Authorized Transporter of Casinghead Gas	III. DESIGNATION OF TRAN	NSPORTER OF	OIL AND NAT	URAL GAS	ve address to w	rick approved	copy of this for	m is to be se	mi)	
Address (Give address to which approved copy of the large CNNCO, INC.		XX		DOV 15	O NOTES	TA NM	88210			
Second Complete   Co	NAVAJO REFINING CO.	ghead Gas XX	or Dry Gas	Address (Gi	ve address to w	hick approved	copy of this for	m is to be se	met)	
First production is commission with that from any other lease or pool, give commissing order searcher:   If this production is commission with that from any other lease or pool, give commission order searcher:   If this production is commission with that from any other lease or pool, give commission or commission or commission with that from any other lease or pool, give commission or commission with that from any other lease or pool, give commission or commission with that from any other lease or pool, give commission or comm	1				97, HOUS	TON, TX	77252			
Title production is commissipled with that from any other lease or pool, give communitying order sampler:  IV. COMPLETION DATA  Designate Type of Completion - (X)  Date Sputded  Date Compl. Rendy to Prod.  Date Producing Formation  TUBING, CASING AND CEMENTING RECORD  Depth Chaing Shoe  TUBING, CASING AND CEMENTING RECORD  Depth Chaing Shoe  TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE  OIL WELL  (I'est must be after recovery of total volume of load oil and must be aqual to or exceed top allowable for this depth or be for full 24 hours.)  Date First New Oil Run To Track  Date of Test  Length of Test  Actual Prod. Tost - MCF/D  Length of Test  Actual Prod. Tost - MCF/D  Length of Test  Tubing Pressure (Shut-in)  Tubing Pressure (Shut-in)  VI. OPERATOR CERTIFICATE OF COMPLIANCE  Inversely certify that the rules and regulations of the Oil Comercention  Division have been completed with and that the information gives above as own see completed to the been of my knowledge and belief.  Part 316-72-322.  Title  Title  Title  Title  Title	If well produces oil or liquids,	1							_	
Designate Type of Completion - (X)  Date Spudded  Date Compl. Ready to Prod.  Date Spudded  Date Spu							0 10 11			
Designate Type of Completion - (X)  Date Sputded  Date Compl. Ready to Prod.  Date Sputded  Date Compl. Ready to Prod.  Total Depth  P.B.T.D.  Total Depth  P.B.T.D.  Total Depth  Depth Cusing 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 vidence of load oil and must be aqual to or exceed top allowable for this depth or be for full 24 hours.)  Date First New Oil Run To Task  Date of Test  Length of Test  Tubing Pressure  Casing Pressure (Shut-in)  Testing Method (pion, back pr.)  Tubing Pressure (Shut-in)  Testing Method (pion, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  OIL CONSERVATION DIVISION  Date Approved  Date	If this production is commingled with that  TV COMPLETION DATA	from any other lease	or poor, give commi	g.mg			·		Diff Back	
Date Spudded  Date Compl. Ready to Prod.  Total Depth  Total Depth  Total Depth  Tubing Depth  Tubing Depth  Depth Casing Shoe  TUBING, CASING AND CEMENTING RECORD  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING A 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 aqual to or exceed top allowable for this depth or be for full 24 hours.)  Date First New Oil Run To Tank  Date of Test  Tubing Pressure  Casing Pressure  Choke Size  Casing Pressure  Choke Size  Oil - Bbis.  Water - Bbis.  Gas-MCF  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules used regulations of the Oil Conservation Division have been complete to the best of my incorrisoing given shove; is true used completes to the best of my incorrisoing given shove; is true used completes to the best of my incorrisoing given shove; is true used completes to the best of my incorrisoing given shove; is true used completes to the best of my incorrisoing given shove; is true used completes to the best of my incorrisoing given shove; is true used completes to the best of my incorrisoing given shove; is true used completes to the best of my incorrisoing given shove; is true used completes to the best of my incorrisoing given shove; is true used completes to the best of my incorrisoing given shove; is true used completes to the best of my incorrisoing given shove; is true used completes to the best of my incorrisoing given shove; is true used completes to the best of my incorrisoing given shove.  Figure 1. The must be a full manufacture of the Oil Conservation Date Approved  Date Approved  Date Approved  Date Approved  Date Approved  Title  Title  Title			ell Gas Well	New Well	Workover	Deepca	Plug Back	iame Kesv	Dill Resv	
Elevations (DF, RKB, RT, GR, etc.)  Name of Producing Formation  Top Oll/Cas Pay  Tubing Depth  Depth Cusing 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 aqual to or exceed top allowable for this depth or be for full 24 hours.)  Date First New Oil Run To Tank  Date of Test  Length of Test  Tubing Pressure  Casing Pressure  Choke Size  Gas-MCF  Toeling Method (pstot, back pr.)  Tubing Pressure (Shut-in)  VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been compiled with and that the information given shove je-trify and complete to the best of my bacoviologe and belief.  Paul Kault-  Signature Paul Scale  Paul Kault-  Paul Kault-  Paul Kault-  Paul Kault-  Title  Title  Title			to Prod.	Total Depth	.L		P.B.T.D.			
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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 aqual 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, stc.)  Casing Pressure  Choke Size  Oil - Bbls.  Gas-MCF  Totting Method (pilot, back pr.)  Tubing Pressure (Shut-in)  Tubing Pressure (Shut-in)  Casing Pressure							Depth Casing Shoe			
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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 WELL  Actual Prod. Test - MCF/D Length of Test  Toting Method (putot, back pr.) Tubing Pressure (Shut-in)  VI. OPERATOR CERTIFICATE OF COMPLIANCE 1 hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information gives above ja-trow and complete to the best of my knowledge and belief.  Signature PARSY (HOLCOMB Tale Tale Paul Kaul- Paul Kaul- Paul Kaul- Paul Kaul- Paul Kaul- Paul Kaul- Title				D CEMENT	ING KECUI	<u>τ</u>	S	ACKS CEN	MENT	
Date First New Oil Run To Tank  Date of Test  Length of Test  Length of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  Cravity of Condensate  Mater - Bbls.  Gas - MCF  Cravity of Condensate  Casing Pressure (Shut-in)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  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 in true and complete to the best of my knowledge and belief.  Printed Name  Patty HOLCOMB  AGENT  Printed Name  Title  Signature  PATSY HOLCOMB  AGENT  Title  Title  Title  Title  Title  Title  Title  Title	HOLE SIZE	CASING & TUBING SIZE			DEPIRSET					
Date First New Oil Run To Tank  Date of Test  Length of Test  Length of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  Cravity of Condensate  Mater - Bbls.  Gas - MCF  Cravity of Condensate  Casing Pressure (Shut-in)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  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 in true and complete to the best of my knowledge and belief.  Printed Name  Patty HOLCOMB  AGENT  Printed Name  Title  Signature  PATSY HOLCOMB  AGENT  Title  Title  Title  Title  Title  Title  Title  Title										
Date First New Oil Run To Tank  Date of Test  Length of Test  Length of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  Cravity of Condensate  Mater - Bbis.  Gas-MCF  GAS WELL  Actual Prod. Test - MCF/D  Length of Test  Tubing Pressure (Shut-in)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Clocke 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 browledge and belief.  Printed Name  Party Holcomb  R17 336-7232.  Printed Name  Title  Title  Title  Title  Title  Title										
Date First New Oil Run To Tank  Date of Test  Length of Test  Length of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  Cravity of Condensate  Mater - Bbls.  Gas - MCF  Cravity of Condensate  Casing Pressure (Shut-in)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  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 in true and complete to the best of my knowledge and belief.  Printed Name  Patty HOLCOMB  AGENT  Printed Name  Title  Signature  PATSY HOLCOMB  AGENT  Title  Title  Title  Title  Title  Title  Title  Title										
Date First New Oil Run To Tank  Date of Test  Length of Test  Length of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  Cravity of Condensate  Mater - Bbls.  Gas - MCF  Cravity of Condensate  Casing Pressure (Shut-in)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  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 in true and complete to the best of my knowledge and belief.  Printed Name  Patty HOLCOMB  AGENT  Printed Name  Title  Signature  PATSY HOLCOMB  AGENT  Title  Title  Title  Title  Title  Title  Title  Title	V. TEST DATA AND REQUE	ST FOR ALLO	WABLE	um be equal to	or exceed top a	Homable for th	is depth or be j	ior full 24 he	purs.)	
Length of Test  Length of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  Case MCF  Casual Prod. During Test  Oil - Bbls.  Case MCF  Casual Prod. Test - MCF/D  Length of Test  Bbls. Condensate/MMCF  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  1 hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above in-trust and complete to the best of my knowledge and belief.  Signature  PATSY WIOLCOMB  Title  Title  Title  Title  Title  Title  Title	OIL WELL (Test must be after		me of toda ou unu m	Producing	Method (Flow,	pump, gas lift.	ec.)			
Length of Test    Tubing Pressure   Casing Pressure	Date First New Oil Run To Tank	Date of Year	_				Chalte Size			
Actual Prod. During Test  Oil - Bbls.  GAS WELL  Actual Prod. Test - MCF/D  Length of Test  Tubing Pressure (Shut-in)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  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.  Signature  PATSY HOLCOMB  AGENT  Tatle  Printed Name  Title  Title  Title  Title  Title  Title	Length of Test	Tubing Pressure		Casing Pre	Casing Pressure					
Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Clocks Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  1 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.  Signature  PATSY HOLCOMB  AGENT  Printed Name  817 336-7232	Actual Prod. During Test	Oil - Bbls.	Water - Bt	Water - Bbls.						
Actual Prod. Test - MCF/D  Length of Test  Tosting Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  OIL CONSERVATION DIVISION  OIL CONSERVATION DIVISION  OIL CONSERVATION DIVISION  Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  PATSY HOLCOMB  AGENT  Printed Name  817 336-7232	CACHELL						Commission of	Condensate		
Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  1 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.  Signature  PATSY HOLCOMB  Tatle  Printed Name  817 336-7232	Actual Prof. Test - MCF/D	Length of Test		Bbis. Con	Bbis. Condensate/MMCF					
VI. OPERATOR CERTIFICATE OF COMPLIANCE  1 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.  Date Approved  Date Approved  By  Paul Kaula  Printed Name  817 336-7232	Actual Floor Food			Casing Po	Casing Pressure (Shut-is)			Choke Size		
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.  Date Approved  Drig. Sign.  Paul Kault.  By  Friends Name  Printed Name  817 336-7232	Testing Method (pitot, back pr.)	Tubing Pressure (								
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.  Date Approved  Drig. Sign.  Paul Kauta  Printed Name  Repologist  Title  Title  Title  Title	VI OPERATOR CERTIFI	CATE OF CO	MPLIANCE		OII CC	NSER	VATION	DIVIS	ION	
Division have been complied with and that the microstate is true and complied to the best of my knowledge and belief.    Date Approved	وور المور مماري مياه ميلاد بهند	entations of the Utl C	AND	II		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	N	ir t	I. Taki	
Signature PATSY WHOLCOMB AGENT Tatle Printed Name  817 336-7232  Title  Title				~	ata Annom	ved	U	4 · ·	7.00	
Signature PATSY WHOLCOMB AGENT Title Printed Name  817 336-7232	( )	7			me who	David Sig	1.			
Signature PATSY VHOLCOMB AGENT Tatle  Printed Name 817 336-7232	1 Thitanklall	ml -		_    🗛	<b>v</b>	. Paul l	aut		Safery A.	
PATSY HOLCOMB  Title  Title  Title  Title	Signature		a CENTE		,	A Seon	RIDA	A STATE		
817 336-7232	PATSY HOLCOMB			_ ∥ π	itle					
A	Printed Name 12-17-90	8	17 336-7232 Telephone No.	11 -						

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 accord
- 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.
  - Senarate Form C-104 must be filed for each pool in multiply completed wells.