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|------------------|-----|--|--|
| DISTRIBUTION | | | |
| SANTA FE | | | |
| FILE | | | |
| U.S.G.S. | | | |
| LAND OFFICE | | | |
| TRANSPORTER | OIL | | |
| | GAS | | |
| OPERATOR | | | |
| PRORATION OFFICE | | | |

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-1.
Effective 1-1-65

I. Operator
Wainoco Oil & Gas Company
Address
1200 Smith, Suite 1500, Houston, Texas 77002
Reason(s) for filing (Check proper box)
New Well ☐ Change in Transporter of:
Recompletion ☐ Oil ☒ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐
Other (Please explain)
Also add gas transporter and test data.
CASINGHEAD GAS MUST NOT BE
FLARED AFTER 8/1/82
UNLESS AN EXCEPTION TO R-4870
IS OBTAINED.

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|-----------------|----------|--------------------------------|-----------------------------|--------------|
| Lease Name | Well No. | Pool Name, Including Formation | Kind of Lease | Lease No. |
| Aztec State Com | 3 | Lovington, NE-Penn | State, Federal or Fee State | 0G-4765 |
| Location | | | | |
| Unit Letter | M | 660 | Feet From The South | Line and 660 |
| | | Feet From The West | | |
| Line of Section | 18 | Township | 16S | Range 37E |
| | | , 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"/> | Address (Give address to which approved copy of this form is to be sent) |
| Texas-New Mexico Pipe Line Company | P. O. Box 2528, Hobbs, New Mexico 88240 |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| Warren Petroleum Company | P. O. Box 1589, Tulsa, Oklahoma 74102 |
| If well produces oil or liquids, give location of tanks. | Unit Sec. Twp. Rge. Is gas actually connected? When |
| | M 18 16S 37E No; should be connected approx. 6-23-82 |

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 | Date Compl. Ready to Prod. | Total Depth | P.B.T.D. | | | | | |
| 11-17-81 | 2-8-82 | 11,375' | 11,360' | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth | | | | | |
| 3844' GL, 3857' KB | Pennsylvanian | 11,219' | 11,013' | | | | | |
| Perforations | | | | | | Depth Casing Shoe | | |
| 11,219-11,338' | | | | | | 11,374' | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT | | | | | |
| 17-1/2" | 13-3/8" | 442' | 450 sx. | | | | | |
| 12-1/4" | 8-5/8" | 4103' | 1700 sx. | | | | | |
| 7-7/8" | 5-1/2" | 11374' | 400 sx. | | | | | |
| | 2-7/8" | 11013' | None | | | | | |

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 Tanks | Date of Test | Producing Method (Flow, pump, gas lift, etc.) | |
| 2-7-82 (testing) | 2-18-82 | Flowing | |
| Length of Test | Tubing Pressure | Casing Pressure | Choke Size |
| 24 hrs. | 290 psi | 0 psi | 1" |
| Actual Prod. During Test | Oil-Bbls. | Water-Bbls. | Gas-MCF |
| | 480 | 0 | 2000 |

GAS WELL

| | | | |
|----------------------------------|---------------------------|---------------------------|-----------------------|
| Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMCF | Gravity of Condensate |
| Testing Method (prior, back pr.) | Tubing Pressure (shut-in) | Casing Pressure (shut-in) | Choke Size |

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Pat Budro

(Signature)

Regulatory Supervisor

(Title)

June 18, 1982

(Date)

OIL CONSERVATION COMMISSION

APPROVED JUN 20 1982, 19
ORIGINAL SIGNED BY
BY JERRY SEXTON
TITLE DISTRICT 1 SUPR.

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable 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. Complete Form C-104 must be filed for each test to multiple