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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
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

RECEIVED

'92 APR 3 AM 9 11

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Rotary Wire Line Service, Inc.	Well API No. 30-025-27927
Address P.O. Box 2135, Hobbs, New Mexico 88241-2135	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator MEXTEK Supply Texaco Inc. P.O. Box 728, Hobbs, NM 88240	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Lee Carter	Well No. 1	Pool Name, Including Formation Knowles Drinkard, West	Kind of Lease State, Federal or <u>Fee</u>	Lease No.
Location Unit Letter <u>H</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u> Line Section <u>33</u> Township <u>16S</u> Range <u>37E</u> , 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"/> Texaco Trading & Transportation Inc. 1090-0557	Address (Give address to which approved copy of this form is to be sent) P.O. Box 6196, Midland, Texas 79711-0196					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> n/a	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 33	Twp. 16S	Rge. 37E	Is gas actually connected? No	When ?

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 xx	Gas Well	New Well	Workover xx	Deepen	Plug Back xx	Same Res'v	Diff Res'v xx
Date Spudded 10-21-82	Date Compl. Ready to Prod. 6-5-83		Total Depth 11,515		P.B.T.D. 8579'			
Elevations (DF, RKB, RT, GR, etc.) 3778' (DF)	Name of Producing Formation Drinkard		Top Oil/Gas Pay 7780'		Tubing Depth			
Perforations 7782'-7937'					Depth Casing Shoe 7747'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		377		550			
11"	8 5/8"		4800		2650			
7 7/8"	5 1/2"		11515		2400			

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- 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 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.

Mickey Welborn

Signature Mickey Welborn President

Printed Name 03-13-92 Telephone No. 505-397-6302

Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAR 31 '92

By [Signature]
Title DISTRICT 1 SUPERVISOR

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.
- 4) Separate Form C-104 must be filed for each pool in multiple-completed wells.