STATE OF NEW MEXICO		ATION DIVISIC.	Form C-104 Revised 10-1-78
3ANTAPE FILE		W MEXICO 87501	
U 1.0.1.	REQUEST FO	DR ALLOWABLE	
77 ANIPONTEN 011. 0 A6	-	AND SPORT OIL AND NATURAL GAS	
Covidior ARROWHEAD OIL	CORPORATION		
Ldiraa		0	
BUX 548, ARTE Reason(s) for Tiling (Check proper box	SIA, NEW MEXICO 8821	Other (Please explain)	
New Well X Recompletion Change in Ownership	Change in Transporter of: Cil Dry C	Gae	
If change of ownership give name and address of previous owner			
DESCRIPTION OF WELL AND	Well No.   Pool Name, Including .	Formation Kind of L	Fed. 100294
Brown Federal	3 Maljamar-Gr	ayburg-SA State, Fea	leral or Foo Fed. LC0294
Unit Letter A ; 44	5' Feel From The North L	ine and 990' Feet Fre	om The East
	wnship 17S Range	32Е , ммрм,	Lea, cou
DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL G	AS	
Name of Authorized Transporter of Cil Navajo Refini	X or Condensate	Address (Give address to which ap Dr. 159, Artesia,	proved copy of this form is to be sent) NM 88210
Navajo <u>Relini</u> Name of Authorized Transporter of Co Conoco, Inc.	singhead Gas 🔏 or Dry Gas 🗌	Address (Give address to which op Box 1267, Ponca Ci	proved copy of this form is to be sent)
If well produces off or liquids,	Unit Sec. Twp. Rge. D 31 175 32E		When 10-09-88
give location of tanks.	th that from any other lease or pool,	1	
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Bock Same Resty, Dill, R
Designate Type of Completic	on (X) X	Total Depth	P.B.T.D.
Date Spuddod 9-16-88	Date Compl. Ready to Prod. 10-09-88	4200'	4163'
Elevations (DF, RKB, RT, GR, etc.) 3894.3 GR	Stame of Producing Formation	Top Oll/Gas Pay 3904 '	Tubing Dopth
Fertorutions 3904-10-12-19 4000-16-24-34	-23-33-41-45-58-60-6	4-78-88-97-98-	Depth Casing Shoe 4163'
HOLE SIZE	TUBING, CASING, AN	D CEMENTING RECORD	SACKS CEMENT
124 "	8 5/8"	885'	500 sx cir
7 7/8"	5불"	4163'	500_sx_class_C_cir
TEST DATA AND REQUEST FO	DR ALLOWABLE (Test must be a able for this d	1 feer recovery of total volume of load of spih or be for full 24 hours)	) bil and must be equal to or exceed top a
OIF, WELL Date Effect New Off Run To Tanks	Date of Test	Producing Method (Flow, pump, gas	
10-09-88	10-10-88 Tubing Pressure	Flowing back	Choie Sile Choie Sile 26/64
24 Actual Prod. During Test	O11-8bls.	100# Water-Bbls.	Gas-MCF
80	80	frac	100
CAS WELL Actual Frod. 7++1+MCF/D	Longth of Tool	Bbla. Condensate/AMCF	Gravity of Condensate
iseling Method (pirot, back pr.)	Tubing Presewe (Shut-in)	Cosing Pressure (Shut-in)	Choke Size
			ATION BIVISION
DERTIFICATE OF COMPLIANC	E regulations of the Oil Conservation and that the information given	DIL CONSERV Livi APPROVED ORIGINAL SI	ATION BINISION
DERTIFICATE OF COMPLIANC	E regulations of the Oil Conservation and that the information given	DIL CONSERV Livi APPROVED ORIGINAL SI BY	ATION BINISION
DERTIFICATE OF COMPLIANC	E regulations of the Oil Conservation and that the information given	OIL CONSERV Lity 1 APPROVED ORIGINAL SI BY TITLE This form is to be filed in	ATION DIVISION , 19 , 19 IGNED BY JERQY SEXTON HCT I SUPERVISOR 1 compliance with AUL & 1104.
DERTIFICATE OF COMPLIANCE hereby certify that the rules and rules in have been complied with bove is true and complete to the complete to the	E regulations of the Oil Conservation and that the information given	DIL CONSERV Livi APPROVED ORIGINAL SI BY TITLE This form is to be filed in If this is a request for all or this form much discom	ATION DIVISION , 19 IGNED BY JERGY SEXTON NCT + SUPERVISOR n compliance with BUL E 1104. owable for a newly drilled or despe
Derrition have been complied with bove is true and complete to the contract of the second complete to the second complete to the contract of the second complete to the seco	CE equiations of the Oil Conservation and that the information given best of my knowledge and belief,	DIL CONSERV Live APPROVED ORIGINAL SI BY TITLE This form is to be filed in If this is a request for all well, this form must be accom tests taken on the well in acc	ATION DIVISION . 19 
DERTIFICATE OF COMPLIANCE hereby certify that the rules and ru- pivision have been complied with bove is true and complete to the management of the start of the formation of the start of	CE equiations of the Oil Conservation and that the information given best of my knowledge and belief.	DIL CONSERV Lite APPROVED ORIGINAL SI BY TITLE This form is to be filed in If this is a request for all well, this form must be accom tests taken on the well in acc All sections of this form r able on new and recompleted	ATION DIVISION . 19 

September 27,1988

Arrowhead Oil Company P.O. Box 548 Artesia, N.M. 88211

REF: Brown #3

Gentlemen:

The following is a Deviation Survey on the above referenced well located in Lea County, New Mexico.

251' - 1/2°	1330' <b>-</b> 3/4°	3254' - 1°
493' - 1°	1797' - 3/4°	3359 <b>' -</b> 3/4°
766' - 1°	2281' - 2 1/4°	3840' - 3/4°
825' - 1°	2763' <b>-</b> 1 1/2°	4213' - 3/4° TD

Sincerely,

Arnold Newkirk

Vice President



STATE OF NEW MEXICO)

)

COUNTY OF CHAVES )

The foregoing was acknowledged before me this <u>97<sup>L</sup></u> day of <u>Accomban</u> 1988 by Arnold Newkirk.

MY COMMISSION EXPIRES

lans

NOTARY PUBLIC

11-19--91