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

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

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

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

P.O. Box 2088

OIL CONSERVATION DIVISION

CO. Dizwei DD, Ancaz, Nii 00210		Santa	Fe, New Me	xico 87504-	-2088				
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	REOUE	ST FOR	ALLOWAR	I F AND AL	JTHORIZ/	ATION			
REQUEST FOR ALLOWABLE AND AUTHORIZATION  TO TRANSPORT OIL AND NATURAL GAS									
Operator GREENHILL PETROLEUM C	Well A 30			025 31287					
Addiess 11490 Westheimer, Sui	te 200,	Houston	n, Texas	77077					
Reason(s) for Filing (Check proper box)					l'lease explain	)			
New Well XX Recompletion	Oil	Change in Tra	• —						
Change in Operator	Casinghead		ndensate [						
f change of operator give name and address of previous operator									
I. DESCRIPTION OF WELL AND LEASE									
Lease Name	ng Formation			Kind of Lease State, Pederal or Fee		Lease No.			
Lovington Paddock Unit	Paddock			Pederal or Fee B 7845					
Location Unit Letter0	. 126	0 Fee	et From The S	outh lines	nd 2585	Fe	et From The	East	Line
Section 36 Townshilp 16S Range 36E , NMPM, Lea County									
II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil or Condensate   Address (Give address to which approved copy of this form is to be sent)									
Name of Authorized Transporter of Oil	Address (Give address to which approved copy of this form is to be sent) P. O. BOX 2528, HObbs, NM 88240					eni)			
Texas New Mexico Pipel Name of Authorized Transporter of Casing	Address (Give address to which approved copy of this form is to be sent)					eni)			
Phillips 66 Natural Ga	s Compai		4001 Pent						
If well produces oil or liquids, ive location of tanks.	Unit S	Sec.   Tw	7p.   Rge.   7S   36E	Is gas actually connected? When ? 2-20-92					
f this production is commingled with that f V. COMPLETION DATA	rom any other	r lease or pool	l, give comming!	ing order number	:				
	<b></b>	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back Sar	me Res'v	Diff Res'v
Designate Type of Completion -		XXX	<u></u>	XXXX Total Depth			P.B.T.D.		
Date Spadded 1-6-92	Date Compl. Ready to Prod. 2-20-92			6450'			(P.B.1.D.)		
Elevations (DF, RKB, RT, GR, etc.)	Name of Pro	ducing Forma	uion	Top Oil/Cas Pay			Tubing Depth		
3823 GR Paddock							6349 Depth Casing Shoe		
Cerforations  Depth Casing Shoe									
TUBING, CASING AND CEMENTING RECORD									
HOLE SIZE	CASING & TUBING SIZE			1305 '			SACKS CEMENT 550 Sacks		
7 7/8"	8 5/8" 24# 5 1/2" 15.5#			6450'			1800 sacks		
TEST DATA AND REOUES	T FOR AL	LOWAB	LE				L		
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 3-15	5-92		Producing Method (Flow, purp, gas lift, etc.) Pump					
2-18-92 Length of Test	Tubing Pressure			Casing Pressure			Choke Size		
Length of Test 24 hours							Gas- MCI <sup>†</sup>		
Actual Prod. During Test 236	Oil - Bbls. 55			Water - Bbls. 181			TSTM		
GAS WELL									
Actual Prod. Test - MCF/D	Length of To	કા		Bbls. Condensate/MMCF			Gravity of Condensate		
esting Method (pitot, back pr.)	Tubing Press	sure (Shut-in)		Casing Pressure (Shut-in)			Choke Size		
VI. OPERATOR CERTIFICA	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				1					
is true and complete to the best of my knowledge and belief.				Date Approved MAR 26					
a.l. IM A									
Signature				Orig. Signed by By Paul Kautz Geologist					
Michael J. Newport-Land MgrPermian Basin				    Title_	ૃ <b>હ</b>	AAYAN SA			
3-23-92 (713) 589-8484								<del></del>	
Date		Telepho	ne No.					<u></u>	

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.

  A) Separate Form C 104 must be filed for each post in multiple.