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

DISTRICT II
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DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I. Operator GREENHILL PETROLEUM CORPORATION		Well API No. 30 025 31542
Address 11490 Westheimer, Suite 200, Houston, Texas 77077		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE			
Lease Name Lovington San Andres Unit	Well No. 76	Pool Name, Including Formation Lovington Grayburg San Andres	Kind of Lease State, Federal or Fee
Location Unit Letter B : 1058 Feet From The North Line and 1480 Feet From The East Line		Lease No. B 2411	
Section 36 Township 16S Range 36E, NMPM,		Lea County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil XXXXX or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)	
TEXAS NEW MEXICO PIPELINE COMPANY		P. O. Box 2528 Hobbs, New Mexico 88240	
Name of Authorized Transporter of Casinghead Gas XXX or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)	
GPM GAS CORPORATION		4001 Penbrook, Odessa, Texas 79762	
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 1	Twp. 17S Rge. 36E
Is gas actually connected?		When?	
yes		7-30-92	
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 XXX	Gas Well	New Well XXX
Date Spudded 7-1-92	Date Compl. Ready to Prod. 7-30-92	Total Depth 5100'	Workover
Elevations (DF, RKB, RT, GR, etc.) 3830 GR	Name of Producing Formation San Andres	Top Oil/Gas Pay -----	Deepen
Perforations 4686' - 5032'	Plug Back		
TUBING, CASING AND CEMENTING RECORD			
HOLE SIZE 12 1/4" 7 7/8"	CASING & TUBING SIZE 8 5/8" 24# 5 1/2" 15.5#	DEPTH SET 1305' 5100'	SACKS CEMENT 500 sacks of Class C 1175 sacks of Class C

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 7-28-92	Date of Test 8-12-92	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure -----	Casing Pressure -----	Choke Size -----
Actual Prod. During Test 255	Oil - Bbls. 9	Water - Bbls. 246	Gas - MCF TSTM

GAS WELL			
Actual First 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.	
Signature Michael J. Newport	Title Land Manager-Permian Basin
Date 8-14-92	Telephone No. (713) 589-8484

OIL CONSERVATION DIVISION	
AUG 21 '92	
Date Approved	
By	ORIGINAL SIGNED BY JERRY SEXTON
Title	DISTRICT I 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 multiply completed wells.