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Appropriate District Office
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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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I. Operator GREENHILL PETROLEUM CORPORATION		Well API No. 30 025 31546
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		Kind of Lease (State) Federal or Fee	Lease No. B 7845
Lease Name Lovington San Andres Unit	Well No. 80	Pool Name, Including Formation Lovington Grayburg San Andres	
Location Unit Letter 0 : 1225 Feet From The South Line and 2485 Feet From The East Line Section 36 Township 16S Range 36E , NMPM, Lea County			

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS		Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Oil XXXXX or Condensate <input type="checkbox"/>	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"/>	GPM GAS CORPORATION 4001 Penbrook, Odessa, Texas 79762		
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 1	When 7-22-92
	Twp. 17S	Rge. 36E	Is gas actually connected? yes

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA		New Well XXX	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Designate Type of Completion - (X)	Oil Well XXX	Gas Well					
Date Spudded 6-21-92	Date Compl. Ready to Prod. 7-22-92	Total Depth 5145	P.B.T.D. -----				
Elevations (DF, RKB, RT, GR, etc.) 3823 GR	Name of Producing Formation San Andres	Top Oil/Gas Pay -----	Tubing Depth 5037				
Perforations 4654-5090			Depth Casing Shoe -----				
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 1335 5145	SACKS CEMENT 500 sacks of Class C 1100 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 7-17-92	Date of Test 7-27-92	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hours	Tubing Pressure -----	Casing Pressure -----	Choke Size -----
Actual Prod. During Test 963	Oil - Bbls. 5	Water - Bbls. 958	Gas - MCF TSTM

GAS WELL		lbs. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test - MCF/D	Length of Test	Casing Pressure (Shut-in)	Choke Size
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)		

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	
Printed Name Michael J. Newport	Land Manager-Permian Basin
Date 8-10-92	Telephone No. (713) 589-8484

OIL CONSERVATION DIVISION	
AUG 14 '92	
Date Approved	
By ORIGINAL SIGNED BY JERRY SEXTON	
DISTRICT SUPERVISOR	
Title	

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.