

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

DISTRICT III
000 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

Operator Lanexco, Inc.		Well API No. 30-025-25136
Address P.O. Box 1206 Jal N.M. 88252		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/>	Approval to flare casinghead gas from this well must be obtained from the BUREAU OF LAND MANAGEMENT (BLM)
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
Change of operator give name and address of previous operator		

I. DESCRIPTION OF WELL AND LEASE

Lease Name Sloan Federal	Well No. 1	Pool Name, Including Formation Lusk Bone Spring East	Kind of Lease State, Federal or Fee	Lease No. NM 12412
Location Unit Letter D : 660 Feet From The North Line and 660 Feet From The West Line Section 22 Township 19-S Range 32-E, NMPLM, Lea County				

II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

SCURLOCK PERMIAN CORP EFF 9-1-91

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Permian Corp.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1183 Houston, TX 77001	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Co. 66 Natl gas	Address (Give address to which approved copy of this form is to be sent) P.O. Box 19 Bartlesville, OK. 74189	
Is well produces oil or liquids, give location of tanks.	Unit D	Sec. 22
	Twp. 19-S	Rge. 32-E
	Is gas actually connected? NO	
	When? Testing gas awaiting right of way.	

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

V. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded Re-entered 8-23-89	Date Compl. Ready to Prod. 9-27-89	Total Depth 10915		P.B.T.D. 9570				
Levations (DF, RKB, RT, GR, etc.) 3633 RKB	Name of Producing Formation Bone Spring	Top Oil/Gas Pay 7315		Tubing Depth 9532				
Perforations 9405, 9435, 9435, 9470, 9472, 9474, 9476, 9478, 9480, 9482, 9484, 9486, 9488, 9490.	14 perfs .46 size		Depth Casing Shoe 10915					

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
17 1/2	13 3/8	375	400 SX
12 1/4	9 5/8	4100	2700 SX
8 3/4	7	3790-10915	1800 SX
	2 7/8	9532	

TEST DATA AND REQUEST FOR ALLOWABLE

II. 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.)

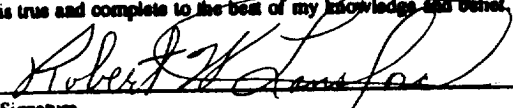
Date First New Oil Run To Tank 9-13-89	Date of Test 9-17-89	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24	Tubing Pressure 375 PSI	Casing Pressure Packer in hole	Choke Size 28/64
Actual Prod. During Test 617	Oil - Bbls. 530	Water - Bbls. 87	Gas - MCF 118

III. 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

I. 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 
Robert W. Lansford EVP
Printed Name 9-27-89 (505) 395-3056
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved OCT 2 1989

By 
Paul Kautz Geologist
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.

RECEIVED
SEP 29 1989
HOBBS OFFICE

SEP 29 1989

RECEIVED
SEP 29 1989
HOBBS OFFICE

RECEIVED
SEP 29 1989
HOBBS OFFICE