Submit 5 Copies	State of New Mexico	Form C-1
District I	ingy, Minerals and Natural Resources	s Departm Revised 1-1-
P.O. Box 1980, Hobbs, NM 88240	Oil Conservation Div	vision
District II	P.O. Box 2088	
P.O. Drawer DD, Artesia, NM 88210	Santa Fe. New Mexico 87504-1	2088
	REQUEST FOR ALLOWABLE AND AUTHORIZ	ZATION
1.	TO TRANSPORT OIL AND NATURAL GA	AS
Operator: Mack Energy Corp	poration	Well API No .: 20-125-25393
		Well API No.: 30-025-25393
Operator: Mack Energy Corp Address: P.O. Box 276, Ar		Well API No.: 30-025-25393 Telephone No.: (505) 748-3436
	tesia, New Mexico 88210	
Address: P.O. Box 276, Ar	tesia, New Mexico 88210	Telephone No.: (505) 748-3436
Address: P.O. Box 276, Ar Reason(s) for Filing (Check proper New Well	tesia, New Mexico 88210	Telephone No.: (505) 748-3436

	مكفلينا براوان التويين البردار بسرارابي									
Reason(s) for Filing (C New Well Recompletion Change in Operator X	0.	sporter y Gas nderisate		Other (Please explain) of: EFFECTIVE MARCH 1, 1992						
If change of operator gi II. DESCRIPTION OF WELL		d address of	previous	operato		-Ro Corpo swell, NM			ox 8148	,
Lease Name Llano Federal		1	1					Kind of <u>Leas</u> State, Feder		Lease No. NM-23007
Location: Unit K: 231	.0eet From	The WEST 1	ine and 2	310 Fee	t From	The SOUTH	Line. See	c 6 ⊤ 19S	R 32E NM	PM Lea County
III. DESIGNATION OF TRAI	III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS									
Authorized Transporter of Oil X or Condensate : Address-Give address to which approved copy of this form is to be sent Navajo Refining Company P.O. Drawer 159, Artesia, NM 88210										
Authorized Transporter of Casinghead Gas or Dry Address-Give address to which approved copy of this form is to be se Gas:						n is to be sent				
If well produces oil or liquids. Unit Sec. Two. Rge give location of tanks K 6 198 32E				is gas actually connected? When? No				NY TERTA OLIVIER THE TRANSPORT		
If this production is commingled with that from any other lease or pool, give commingling order number:										
Designate Type of Comple	etion - (X)	0il Well	Cas We	l1 New	Well	Workover	Deepen	Plug Back	Same Res	s' Diff Res
Date Spudded	Date Comp	ol. Ready to	Total Depth			P.B.T.D.				
Elevations	Producing Formation			Top Oil/Cas Pay			Tubing	Tubing Depth		
Perforations							Depth	Depth Casing Shoe		
			TUBING.CAS	SING AND	CEMEN	TING RECORD				<u></u>

Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement
· · ·			

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be OIL WELL 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	Producing Method
Length of Test	Tubing Pres		Casing Pressure	Choke Size
Actual Prod. During Test		0il - Bbl	Water - Bbls.	Gas - MCF

CAS WELL

Actual Prod Test - MCF/D		Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate		
Testing Method	Tubing Pr	essure (Shut-in)	Casing Pressure (Shut-in)	Choke size		
V1. 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. Deb E. Chase, Production Clerk Date			OIL CONSERVATION DIVISION			
			By CALL SIGNED BY JERRY SEXTON			
						JISTRALI S SOFERINGON Title
			202 21 Onube, 11		digin bate	