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TRANSPORTER	OIL	
	GAS	
OPERATOR		
PRORATION OFFICE		

NEW MEXICO OIL CONSERVATION COMMISSION  
REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104  
Supersedes Old C-104 and C-110  
Effective 1-1-65

Operator Energy Reserves Group, Inc.	
Address P.O. Box 2437, Midland, TX 79702	
Reason(s) for filing (Check proper box)	
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 Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

Other (Please explain)  
**CASINGHEAD GAS MUST NOT BE  
FLARED AFTER 11/1/81  
UNLESS IN ACCORDANCE TO R-4070  
IS PROHIBITED**

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name Amoco State	Well No. 3	Pool Name, Including Formation Buckeye Abo	Kind of Lease State, Federal or Fee State	Lease No. L-905
Location				
Unit Letter C	550	Feet From The North	Line and 1651	Feet From The West
Line of Section 10	Township 18-S	Range 35-E	, NMPM, Lea County	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2528, Hobbs, N.M. 88240			
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips Petroleum Co.	Address (Give address to which approved copy of this form is to be sent) Frank Phillips Bldg, Bartlesville, OK 74004			
If well produces oil or liquids, give location of tanks.	Unit M	Sec. 3	Twp. 18-S	Rge. 35-E
Is gas actually connected?		When		

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'ty.	Diff. Res'ty.
Date Spudded 7-14-80	Date Compl. Ready to Prod. 10-13-80		Total Depth 9300'		P.B.T.D. 9290'			
Elevations (DF, RKB, RT, GR, etc.) GR 3917.8	Name of Producing Formation Abo Detrital		Top Oil/Gas Pay 8952		Tubing Depth 9215'			
Perforations 9225-9235'; 9120-40'; 8954-66' & 8972-8978'					Depth Casing Shoe 9298'			
TUBING, CASING, AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		418'		475			
11"	8 5/8"		3607'		1160			
7 7/8"	4 1/2"		9298'		505			

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 Tanks 10-1-80	Date of Test 10-13-80	Producing Method (Flow, pump, gas lift, etc.) Pump 2' X 1 1/4" X 24' Rod Pump	
Length of Test 24 hrs	Tubing Pressure --	Casing Pressure 50	Choke Size Open
Actual Prod. During Test	Oil-Bbls. 151	Water-Bbls. 16	Gas-MCF 90

GAS WELL

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

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Jack Calcote Jack Calcote  
(Signature)  
District Clerk  
(Title)  
November 10, 1980  
(Date)

OIL CONSERVATION COMMISSION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY \_\_\_\_\_  
TITLE SUPERVISOR DISTRICT I

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.