

SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
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
Effective 1-1-85

Operator
Mewbourne Oil Company

Address
P. O. Box 7698, Tyler, Texas 75711

Reason(s) for filing (Check proper box)	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 Ownership <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE			
Lease Name Federal "E"	Well No. 9	Pool Name, Including Formation Querecho-Plains Queen (Assoc)	Kind of Lease State, Federal or Fee Federal
			Lease No. NM-4609

Location
Unit Letter <u>H</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>330</u> Feet From The <u>East</u>
Line of Section <u>28</u> Township <u>18 South</u> Range <u>32 East</u> , NMPM, <u>Lea</u> County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS						
Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Phillips Petroleum Company	Address (Give address to which approved copy of this form is to be sent) P. O. Box 791, Midland, Texas 79702					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> EFFECTIVE: February 1, 1984 Phillips Petroleum Company GPM Gas Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 791, Midland, Texas 79702					
If well produces oil or liquids, give location of tanks.	Unit H	Sec. 28	Twp. 18S	Pge. 32E	Is gas actually connected? Yes	When

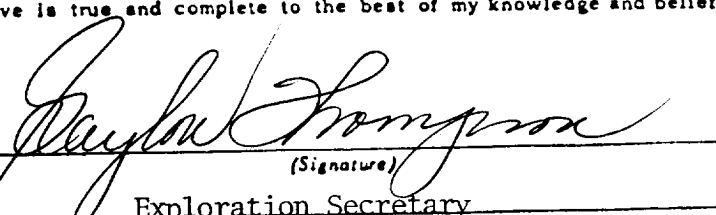
If this production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA			
Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input checked="" type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v. <input type="checkbox"/> Diff. Res'v. <input type="checkbox"/>		
Date Spudded 1/21/84	Date Compl. Ready to Prod. 3/1/84	Total Depth 4294'	P.B.T.D. 4243'
Elevations (DF, RKB, RT, GR, etc.) B 3752', DF 3750.5', GL 3742'	Name of Producing Formation Queen & Penrose	Top Oil/Gas Pay 3875'	Tubing Depth 4204'
Perforations Queen - 3875-3906' - 30 holes & Penrose - 4128-52' - 19 holes			Depth Casing Shoe

TUBING, CASING, AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/2"	8-5/8" 248 955	1214'	400 lite & 200 Class "C"
7-7/8"	4-1/2" 1035 955	4290'	550 lite & 300 Class "C"
4-1/2"	2-3/8"	4204'	

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 3/1/84	Date of Test 3/3/84	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure ----	Casing Pressure 25#	Choke Size ---
Actual Prod. During Test	Oil - Bbls. 30	Water - Bbls. 112	Gas - MCF 25

AS 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

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.  (Signature) Exploration Secretary (Title) March 26, 1984 (Date)	OIL CONSERVATION COMMISSION APPROVED <u>MAR 30 1984</u> , 19 BY <u>ORIGINAL SIGNED BY JERRY SEXTON</u> DISTRICT I SUPERVISOR TITLE _____ 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. Separate Forms C-104 must be filed for each pool in multiply completed wells.
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RECEIVED

MAR 29 1984

G.C.D.
HOBBS OFFICE