State of New Mexico

Submit 5 Copies Appropriate District Office DISTRICTI

DISTRICT II

DISTRICT III

P. O. Box 1980, Hobbs, NM 88240

P. O. Drawer DD, Artesia, NM 88210

1000 Rio Brazos Rd., Aztec, NM 87410

Energy, Minerals and Natural Resources Department

P. O. Box 2088

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104 Revised 1-1-89 See Instructions OIL CONVERSATION DIVISION at Bottom of Page

L											
Operator FENNZOIL PENDOLLUM COMMANY									Well API No. 30 - 025-28780		
Address P. O. EON 2007 INCUSTON TIX VICES-2007											
Reason (s) for Filling (check proper box)							cı (Please exq	•			
New Well	Ch	ange in Tra	insporter o	of:				n 1	1	_	
Recompletion	Oil Dry Gas				EFFECTIVE October 30, 1992						
Change in Operator X	Casinghead	Gas		Condens	ate 🔲				/		
If chance of operator give name											
and address of previous operator Chevron U.S.A. Inc., P. O. Box 1150, Midland, TX 79702											
II. DESCRIPTION OF WELL AND LEASE											
Lease Name	ease Name Well No. Pool Name, In							1	d of Lease	Lease No.	
								Stat	e, Federal or Fee	•	
Lea "XA" State		4	Mesc	slero Es	carpe Bone	Springs		Sta	<u>te</u>	<u> </u>	
Location											
Unit Letter N	_ :	0990	Feet Pi	rom The	South	Line	e and	1650	Feet From The	West Line	
Section 07 Township	188		Range		34E	, NI	ΛPM,		Lea	County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS											
Name of Authorized Transporter of Oil		or Conc	iensate		Addr	cas (Gin	e address to	which appro	ved copy of this f	orm is to be sent)	
-	X										
Texas New Mexico Pipline		-). Box 5568,			· · · · · · · · · · · · · · · · · · ·	
Name of Authorized Transporter of Carinet	Corporati	PXI or	Dry Gas	L	_i Addr					orm is to be sent)	
The part of the court CO.	· · · · · · ·		70	T 200	T		1 Penbrook,		79761		
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge.	Its Sar	actually con	nected 7	When?			
give location of tanks.					- 1	Yes			Unknown		
If this production is commingled with that from any other lease or pool, give commingli						· · · · · · · · · · · · · · · · · · ·		UBLIOWE			
•	tom any outer	sease or po	ioi, give ci	ATHERITA	ing oraca m						
IV. COMPLETION DATA		Oil W	all Con	Well	New Well	Workover	Deepen	Pługback	Same Res'v	Diff Res'v	
Designate Type of Completion	- (X)	On w	-	WCH	INCW Well	Wassia	Deepen	I luguata	Same Res V	Dur Kes V	
Date Spudded	Date Compl. Ready to Prod.				Total Dept	otal Depth I			P. B. T. D.		
Elevations (DF, RKB, RT, GR, etc.)	Mame of Producing Formation					as Pay		Tubing Dep	ibing Depth		
Peforations Depth Casing Shoe											
	TUBING, CASING AND C					C PECOPI	`	<u> </u>			
HOLE SIZE	CASING & TUBING SIZE					DEPTH SET		1	SACKS CEMENT		
	GIBERGE TOBERGE				Ba mobi						
V. TEST DATA AND REQUES OIL WELL (Test must be after re	or exceed to	pp allowable j	for this depth	or be for full 24	hours)						
Date First New Oil Run To Tank					Producing Method (Flow, pump, gas lift, etc.)						
Length of Test	Tubing Pressure				Casing Pressure C			Choke Size	Choke Size		
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gas - MCF			
GAS WELL		-									
Actual Prod. Test - MCF/D	Length of Test				Bbls. Cond	ensate/MM(F	Gravity of	Gravity of Condensate		
Testing Method (pilot, back press.)	Tubing Pressure (Shut - in)				Casing Pressure (Shut - in)			Choke Size	oke Size		
VI. OPERATOR CERTIFICAT						01	I CONS	SEDVAT		SION	
I hereby certify that the rules and regulations of the Oil Conservation					OIL CONSERVATION DIVISION						
Division have been complied with and that the information given above					Date Armenad				FEB 02 1993		
is true and complete to the best of my knowledge and belief.											
Signature Poy R. Johnson Sr. Acct.					By <u>Chichnal Signed by Jeppy Sentition</u> \$1575 CT + DV \$674008						
KOYR. Johnson Sr. Acct.					Title						

Telephone No. 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.

Printed Name <u>/2</u>