

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

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

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 Grace Petroleum Corporation | | Well API No. 30-025-31327 |
| Address 6501 N. Broadway, Oklahoma City, OK 73116 (405) 840-6600 | | |
| Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain) <input type="checkbox"/> approval to flare casinghead gas from this well must be obtained from the BUREAU OF LAND MANAGEMENT (BLM) | | |
| New Well <input checked="" type="checkbox"/> | Change in Transporter of: <input type="checkbox"/> Dry Gas <input type="checkbox"/> | |
| Recompletion <input type="checkbox"/> | Oil <input type="checkbox"/> | |
| Change in Operator <input type="checkbox"/> | Casinghead Gas <input type="checkbox"/> | Condensate <input type="checkbox"/> Request for Allowable |

If change of operator give name and address of previous operator _____

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|---------------|---|--|-----------------------|
| Lease Name Andaway 25 Federal | Well No. 1 | Pool Name, including Formation Geronimo-Delaware | Kind of Lease State, Federal or Fee | Lease No. NM 12413 |
| Location Unit Letter <u>P</u> : <u>660'</u> Feet From The <u>South</u> Line and <u>660'</u> Feet From The <u>East</u> Line Section <u>25</u> Township <u>19S</u> Range <u>32E</u> , 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"/> Sun Refining & Marketing | Address (Give address to which approved copy of this form is to be sent) Box 2039, Tulsa, OK 74102 (800) 688-7074 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit P | Sec. 25 | Twp. 19S | Rge. 32E | Is gas actually connected? No | When? Unknown - testing |

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 | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v | Diff Res'v |
| | | | X | | | | | |
| Date Spudded 8-3-91 | Date Compl. Ready to Prod. 2-1-92 | | Total Depth 7920' | | P.B.T.D. 5510' | | | |
| Elevations (DF, RKB, RT, GR, etc.) GL 3581.1' KB 3596.3' | Name of Producing Formation Delaware | | Top Oil/Gas Pay 5112' | | Tubing Depth 5185' GL | | | |
| Perforations 5112-28', 5138-52', 5164-74' (2 SPF) | | | | | Depth Casing Shoe 7946.4' GL | | | |
| TUBING, CASING AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 17-1/2" | 13-3/8" 48# H-40 | | 500' | | 450 sx Lite to surface | | | |
| 11" | 8-5/8" 32# | | 4510' | | 2650 sx (20' from surface) | | | |
| 7-7/8" | 5-1/2" 17# N-80 | | 7917.8' | | 1100 sx (TOC @ 2400') | | | |
| | 2-7/8" | | | | | | | |

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 Tank February 1, 1992 | Date of Test February 2, 1992 | Producing Method (Flow, pump, gas lift, etc.) Pump | |
| Length of Test 24 hrs | Tubing Pressure 40 psi | Casing Pressure - | Choke Size N/A |
| Actual Prod. During Test same | Oil - Bbls. 58 bbls | Water - Bbls. 259 bbls | Gas - MCF 60 MCFPD |

GAS WELL

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

VI. 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.

M. T. Jordan
Signature
M. T. Jordan Operations Superintendent
Printed Name
FEBRUARY 25, 1992
Date
(405) 840-6624
Telephone No.

OIL CONSERVATION DIVISION

Date Approved _____
By GRACE PETROLEUM CORPORATION
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

FEB 28 1992

JOE ROBERTS OFFICE