

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

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Primero Operating, Inc.		Well API No. 30-025-32297
Address P. O. Box 1433, Roswell, NM 88202-1433		Casinghead Gas Must Not Be Flared After <u>4-23-94</u> Unless an Exception to R-4070 is Obtained.
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 Operator <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name Quarry	Well No. 1	Pool Name, including Formation Bowers, 7 Rivers	Kind of Lease State, Federal or <u>Fee</u>	Lease No. N/A
Location Unit Letter <u>L</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>890</u> Feet From The <u>West</u> Line Section <u>19</u> Township <u>18 South</u> Range <u>38 East</u> , <u>NMPM</u> , <u>Lea</u> 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"/> Petro Source Partners	Address (Give address to which approved copy of this form is to be sent) 9801 Westheimer Suite 900, Houston, TX 77042	
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 L	Sec. 19
	Twp. 18-S	Rge. 38-E
Is gas actually connected? No		When ?

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

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'v	Diff Res'v
Date Spudded 11/16/93	Date Compl. Ready to Prod. 12/28/93		Total Depth 3320		P.B.T.D. 3270			
Elevations (DF, RKB, RT, GR, etc.) 3663 GR	Name of Producing Formation 7 Rivers		Top Oil/Gas Pay 3212		Tubing Depth 3188			
Perforations 3212-3233, 3250-3260					Depth Casing Shoe 3320			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 12-1/4	CASING & TUBING SIZE 8-5/8		DEPTH SET 318		SACKS CEMENT 200			
7-7/8	5-1/2		3320		550			
	2-3/8		3188					

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 12/28/93	Date of Test 12/31/93	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24	Tubing Pressure 2 PSI	Casing Pressure 0	Choke Size N/A
Actual Prod. During Test	Oil - Bbls. 3.63	Water - Bbls. 2.97	Gas - MCF 1.5

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, 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.

Signature
Phelps White
Printed Name
02/15/94
Date
President
Title
(505) 622-1001
Telephone No.

OIL CONSERVATION DIVISION

MAR 01 1994

Date Approved

By

Orig. Signed by
Paul Kautz
Geologist

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.

1. The first part of the document is a letter from the President of the United States to the Congress, dated January 1, 1801. It is a very important document, as it is the first official communication of the new administration.

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