Submit 5 Copies Appropriate District Office DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240

# DISTRICT II P.O. Drawer DD, Astenia, NM \$8210

L

Operator

Address Ρ. 0.

New Well

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM \$7410

#### SHORE OF INCH MEXICU "nergy, Minerals and Natural Resources Depart "it

Form C-104 Revised 1-1-89 See Instruction at Bottom of Page

#### **OIL CONSERVATION DIVISION** P.O. Box 2088

Santa Fe, New Mexico 87504-2088

#### REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Well API No. Xeric Oil & Gas Company Box 51311, Midland, Texas 79710 Reason(s) for Filing (Check proper box) Other (Please explain) Change in Transporter of:

Dry Gas Recompletion **Oil** X Change in Operator Casinghead Gas 🗌 Condensate 🔲 (Effective November 1, 1989) If change of operator give name and address of previous operator Tamarack Petroleum Co., Inc., 500 W. Texas, Ste. 1485, Midland, TX 79701

# IL DESCRIPTION OF WELL AND LEASE

Lease Name	Well No. Pool Name, Including Formation	Kind of Lease Lease No.
Northeast Pearl Queen Unit	19   Pearl Queen	State Federal or Fee E 5837
Location		
Unit Letter K ;]	980 Feel From The South Line and 2	80 Foot From The West Line
Section 23 Township 19-5	Range 35-F NMPM	lea County

### **III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil		or Coude			Address (Unve address to which	approved copy of this form is to be sent)
Shell Pipe Line Compa	ny		L			ouston, Texas 77252
Name of Authorized Transporter of Casi Warren Petroleum Corp	•	and the second sec	or Dry (	Gui 🛄	Address (Give address to which P. O. Box 1589, T	approved copy of this form is to be sent) ulsa, Oklahoma 74102
If well produces oil or liquids,	Unsit	Sec.	Тир	Rge.	Is gas actually connected?	When ?
pive location of tanks.	ic	23	119-S	35-E	Yes	N/A

IV. COMPLETION DATA

Designate Type of Completion	- (X)	Oil Well	Gas Well	New Well	Workover	Deepea	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Com	pl. Ready to Pr	rod.	Total Depth	<b>.</b>	.L	P.B.T.D.	.1	
Elevations (DF, RKB, RT, GR, etc.)	Name of P	roducing Form	ution	Top Oil/Gas	Pay		Tubing Dep	<u>ب</u>	·
Performions	<u></u>		<del></del>				Depth Casin	ng Shoe	······
	1	TUBING, C.	ASING AND	CEMENTI	NG RECOR	D	1	•	
HOLE SIZE	CA	SING & TUBI	NG SIZE		DEPTH SET	*****		SACKS CEM	ENT
					·		+		
		·				· · · · · · · · · · · · · · · · · · ·			

# V. TEST DATA AND REQUEST FOR ALLOWABLE

(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.) OIL WELL Date First New Oil Run To Tank Date of Test Producing Method (Flow, pump, gas lift, etc.)

Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bols.	Water - Bbla	Gas- MCF

# GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
		N		
Tosting 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 knowled	ge and belief.
- Ronald Ca	
Signature Banda II Coos	
Printed Name	Title

OIL CONSERVATI	ON DIVISION

Date Approved	<u>NOV 1 5 1989</u>
Ву	Orig. Signed by Paul Kautz
Title	Geologist

Date

- 89

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.

-/683-3171

Telephone No.

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 NOV 9 1989 HOBES OFFIC

•