STATE OF NEW MEXICO Form C-104 ENERGY AND MINERALS DEPARTMENT Revised 10-01-78 Format 06-01-63 --. -- ----- OIL CONSERVATION DIVISION Page 1 DISTRIBUTION P. O. BOX 2088 SANTA PE SANTA FE, NEW MEXICO 87501 FILE U.1.0.8. LAND OFFICE OIL REQUEST FOR ALLOWABLE TRANSPORTER GAS AND OPERATOR AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS PROBATION OFFICE Operator GREENHILL PETROLEUM CORPORATION Address 16010 Barker's Point Lane, Suite 325, Houston, TX 77079 Other (Please explain) Reason(s) for filing (Check proper box) Change in Transporter of: New Well Effective 1/1/89 Dry Gas 011 Recompletion Condensate Casinghead Gas X Change in Ownership Texaco Producing, Inc., P. O. Box 728, Hobbs, NM 88240 If change of ownership give name and address of previous owner II. DESCRIPTION OF WELL AND LEASE 1.sase No. Kind of Lease Well No. Pool Name, Including Formation Lease Name B-2359 State, Federal or Fee State Lovington Paddock 72 Lovington Paddock Unit Location West Feet From The Feet From The South Line and 2080 660 Ν Unit Letter___ County Lea , NMPM, 36E Range 17S Township Line of Section IIL DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) or Condensate Name of Authorized Transporter of Oli Hobbs, NM 88240 Box 2528. Texas New Mexico Pipeline Company (0095-0512) 0 Address (Give address in this A serverd, crogge this form is to be sent) Name of Authorized Transporter of Casinghead Gas 👽 or Dry Gas GPM Gas Corporation EFFECTIVE: 1 4001 Penbrook TX 79762 Odessa. Company Phillips 66 Natural Gas When , Sec. Unit If well produces oil or liquide, N.A. 36E Yes 17S 1 B give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order numbers NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

A tit	Gene	Linton
(Signature)		
Production Coordinator		
(Title)		
December 28, 1988		
(Date)		

(713) 870-0606

OIL	CONSERVATION DIVISION
PROVED	ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR

BY.

TITLE

API

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepens well, this form must be accompanied by a tabulation of the deviatic tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allow able 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 multipl completed wells.

STAT	E OF	NEW	MEXICO	•
ENERGY MO	MIN	FRALS	OEPARTA	AFAIT
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0.0 1000 1000 0.0 1000 000 64074 FE FRE V.A.0.4. LAND OFFICE TRANSPORTED OR.	c	DIL CONSER P. O. (SANTA FE, N	BOX 2088		ON	Ferm C-104 Reviewd 10-01-78 Fermal 05-01-83 Page 1
	AUTHOR	REQUEST F	OR ALLOWABL AND ISPORT OIL AN		JRAL GAS	
Texaco Producing In Address P.O. Box 723, Hobb	S New Mouries	99240				
Reesen(s) for films (Check prope New Well Recompletion Change in Occurrentip	/ bec/ Change in OU	Transporter of:	1		e explain) ansporter Name Chan	ge
If change of ownership give not and address of provious owner. I. DESCRIPTION OF WELL Lower Name Lovington San Andre Lovington San Andre	AND LEASE	Pool Neme, Including I Lovington San		Coch	Kind of Leose Siete, Federal or Fee Stat	Leese No. B2359
Line of Section	Township 175	Range	<u>36E</u>	, NMPM,	Feel From The West	County
Mune of Authorized Transporter of Texas New Mexico Pig Mane of Authorized Transporter of Phillips 66 Natural	Ceringhead Gas (2)		Asdress /Give a P.O. Box Address /Give a	ddress to	which approved copy of this fo	88240
If well produces all ar liquids, give location of tanks.	Unit Sec. B 1	Twp. Rec. 175 362	Is gas actually a	DOOK,	Odessa, Texas 797	62
f this production in commingled NOTE: Complete Parts IV and	with that from any o V on reverse side	other lease or pool.	give comminglin	g order i	number:	
I. CERTIFICATE OF COMPLI	ANCE		1 0			

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

Y

(Signature) District Administrative Supervisor (Tule) March 20, 1986 (Dets)

01	L CONSERVATION DIVISION	
APPROVED_	APR 1 0 1986	
	HOWAL SIGNED BY JEARY NEETAN	
TITLE	DISTRICT I SUPERVISOR	

This form is to be filed in compliance with RULE 1194.

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 AULE 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 same or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT Form C-104 Revised 10-01-78 -----Forma1 06-01-83 DISTRIBUTION OIL CONSERVATION DIVISION Page 1 SANTA PE P. O. BOX 2088 FILE SANTA FE, NEW MEXICO 87501 U.S.O.A. LAND OFFICE OIL TRANSPORTER REQUEST FOR ALLOWABLE OPERATOR AND PROMATION OFFICE AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Operator Producing Inc. TEXACO Adaress P. O. Box 728, Hobbs, New Mexico 88240 Resson(s) for filing (Check proper box) Other (Please explain) Change of Operator from Getty to New Well Change in Transporter of: TEXACO Producing Inc. 12/31/84 Dry Gas 011 Recompletion Castnaheod Gas Condensate \mathbf{y} Change in Ownership If change of ownership give name and address of previous owner. II. DESCRIPTION OF WELL AND LE Foci Name, Including Formation Kind of Lecse State B2359° Lease Nam •<u>72</u> Lovington Paddock Lovington Paddock Unit State, Federal or Fee Location South Line and _ 2080 Feel From The West 660 N Feet From The Unit Letter , NMPM. Lea 17S 36E County Range Line of Section 1 Township III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS And:ess (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oli or Condensate P.O. Box 2528, Hobbs, N.M. 88240 Texas-NM Pipeline Co. (0095-0512) Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Cosinghead Gas or Dry Gas 4001 Penbrook, Odessa, Texas 79762 Phillips Petroleum Company Is gas actually connected? When Unit Sec. Twp. Rce. If well produces cil or liquida, в 1 ' 17S · 36E Yes give location of tanks.

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

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

W.D. hl

(Signature)

District Operations Manager (Tule) April 10, 1985

(Daie)

OIL CONSERVATION DIVISION		
APPROVED June 1,	. 19	85
y Jun Sector	• 	
TITLE DISTRICT I SUFERVISOR		

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or despende 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.

G.C.S. HOB35 CTTHE

MAY 31 1985

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6. S , 0.011106	AUTEZATION TO T	AND RANSPORT OIL AND RACE SA	t the Appropriate
TRANSPORTER			Na (2780) -
GAS OPERATOR	-		
PRORATION OFFICE			
Getty Oil Company			1999 - Ball gauge and and an of a large and an an an and a state and a second second second second second secon
P. O. Box 1351, Mid	land, Texas 79702		
Reason(s) for filing (Check proper New Well	r box) Chango in Transporter of:	Other (Please explain)	
Recompletion Change in Ownership X		- Oil Company of	apany merged with Getty Ecctive 1-31-77
If change of ownership give nar and address of previous owner	ne		
L DESCRIPTION OF WELL A		2, 0. Box 1351, Midland,	<u>Texas 79702</u>
Lesse Name Lovington Paddock Un	Well No. Pool Name, Including		Le to No
Location		addock (State;) Fed	eral or Feo 6-2359-1
Unit Letter N;	660 Feet From The South 1	line and 2080 Feet Fro	om The LJEST
Line of Section (Township 17-5 Range	36-Е , NMPM, Le	aCounty
Nome of Authorized Transporter of	ORTER OF OIL AND NATURAL C		
Texas-New Mexico Pin	eline Company	Address (Give address to which app P. O. Box 1510, Midl.	proved copy of this form is to be sent)
Nume of Authorized Transporter of Phillips Petroleum Co	Casinghead Gas X or Dry Gas	Address forve address to which upp	proved copy of this form is to be vent)
If well produces cil or liquids,	Unit Sec. Twp. P.ge.	Phillips Building, Od Is gas actually connected?	dessa, Texas 79760
give location of tenks.	<u>B</u> <u>1</u> <u>175</u> <u>36</u>		UNKNEWN
COMPLETION DATA	with that from any other lease or pool Oil Well Gas Well		
Designate Type of Comple	etion $-(X)$	New Well Workover Deepen	Plug Back Same Resty, Diff. Rest
Dote Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, KT, CR, etc.	, Name of Producing Formation	Top Cil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe
	TUBING, CASING, AN	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
TEST DATA AND REQUEST OIL WELL	FOR ALLOWABLE (Test must be a	after recovery of total volume of load of epth or be for full 24 hours)	l and must be equal to or exceed top allow
Date First New Oil Run To Tanks	Date of Test	Producing Mothod (Flow, pump, gas)	
Longth of Test	Tubing Prossure	Casing Freesure	Choke Size
Actual Prod. During Test	Off-Bbls.		
		Water-Bhly,	Gat - MCF
GAS WELL			ντου διαστηγιατικού προστάτου πο διαστογιατικό του που πολογού και παραστηγιά της τη πολογούς τη στηριατική π Τ
Actual Prod. Tout-MCF/D	Longth of Tast	Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Tout-MCF/D Testing Mothod (pitot, back pr.)	Longth of Test Tubing Pressuro (Shut-in)	Bbls. Condensate/MMCF Casing Fressure (Shut-in)	Gravity of Condensate Choke Size
Testing Method (pitot, back pr.)	Tubing Pressuro (Shut-in)	Casing Fressure (thut-in)	Choke Size
Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIAN	Tubing Pressuro (Shut-in)	Contro Fressure (Ehut-in)	Choke Size
Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIAN I hereby certify that the rules and Commission have been complied	Tubing Pressuro (Shut-in) NCE regulations of the Oil Conservation with and that the information sizes	Contro Fresouro (Shut-in) OIL CONSERV FEB 15 1	Choke Size
Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIAN hereby certify that the rules and commission have been complied	Tubing Pressuro (Shut-in)	Controp Fresoure (Ehut-in)	Choke Size
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Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIAN I hereby certify that the rules and Commission have been complied above is true and complete to th (SICIN- (Sign District Product	Tubing Pressuro (Shut-in) NCE regulations of the Oil Conservation with and that the information given the best of my knowledge and belief. () IELOED FILLS horare: LeLand Franz ion. Manager.	Cosing Fresoure (Shut-in) OLL CONSERV FEB 15 (APPROVED DY TITLE This form is to be filled in a If this is a request for silow well, the form must be accompa toets taken on the well in accom- All vections of this form mu	Choke Size Choke Size FION COMMISSION , 19 Orig. Signed by Jercy Series Dist 1, Supv. Compliance with HULE 1104, rable for a newly drilled or despended above with HULE 1104, rable for a newly drilled or despended dence with HULE 111. 81 by filled out completely for chove
Testing Method (pitot, back pr.) CERTIFICATE OF COMPLIAN I hereby certify that the rules and Commission have been complied above is true and complete to th (SICING) (Sign District Product (February 1.)	Tubing Pressuro (Shut-in) NCE regulations of the Oil Conservation with end that the information given the best of my knowledge and belief. (D) ISLADED FILLS Noture) LeLand Franz ion Manager. Manager.	Cosing Fressure (Ehut-in) Cosing Fressure (Ehut-in) FEBI51 APPROVED DY TITLE This form is to be filled in a If this is a request for silov well, this form must be accompa- torte taken on the well in accor All vections of this form mu- able on new and recompleted we	Choke Size Choke Size FION COMMISSION , 19 Orig. Signed by Jercy Series Dist 1, Supv. Compliance with HULE 1104, rable for a newly drilled or despended above with HULE 1104, rable for a newly drilled or despended dence with HULE 111. 81 by filled out completely for chove

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