

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator: Mack Energy Corporation

Well API No.:

Address: P.O. Box 276, Artesia, New Mexico 88210

Telephone No.: (505) 748-3436

Reason(s) for Filing (Check proper box)

Other (Please explain)

New Well

Change in Transporter of:

Recompletion

Oil

Dry Gas

EFFECTIVE JUNE 1, 1992

Change in Operator

Casinghead Gas

Condensate

If change of operator give name and address of previous operator

Randall Capps DBA Xeric Oil & Gas Co.

II. DESCRIPTION OF WELL AND LEASE

P.O. Box 51311, Midland, TX 79710

Lease Name

Gulf State

Well No.

#3

Pool Name, Including Formation

Pearl-Queen

Kind of Lease

State Federal or Fee

Lease No.

E-3143

Location: Unit D: 660 Feet From The WEST line and 660 Feet From The NORTH Line. Sec 36 T 19S R 34E NMPM Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Authorized Transporter of Oil ☒ or Condensate ☐

Texaco Trading & Transportation

Address-Give address to which approved copy of this form is to be sent

P.O. Box 60628, Midland, TX 79702

Authorized Transporter of Casinghead Gas ☐ or Dry

Gas ☐

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

Sec.

Twp.

Rge

E

36

19S

34E

Is gas actually connected?

No

When?

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'	Diff Res
Date Spudded	Date Compl. Ready to Prod.			Total Depth		P.B.T.D.		
Elevations	Producing Formation			Top Oil/Gas Pay		Tubing Depth		
Perforations						Depth Casing Shoe		

TUBING, CASING AND CEMENTING RECORD

Hole Size	Casing & Tubing Size	Depth Set	Sacks Cement

V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be

OIL WELL

equal to or exceed top allowable for this depth or be for full 24 hours)

Date First New Oil Run to Tank		Date of Test	Producing Method
Length of Test	Tubing Pres	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbl	Water - Bbls.	Gas - MCF

GAS WELL

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

Deb E. Chase, Production Clerk

Date

OIL CONSERVATION DIVISION

Date Approved

By

Orig. Signature
Paul Kautz
Geologist

Title