

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

|                     |  |
|---------------------|--|
| NAME OF OPERATOR    |  |
| DATE OF FILING      |  |
| FILE NO.            |  |
| FILED               |  |
| DATE                |  |
| COUNTY              |  |
| TRANSPORTER         |  |
| OIL                 |  |
| NATURAL GAS         |  |
| OPERATOR            |  |
| REGISTRATION OFFICE |  |
| EXPIRATION DATE     |  |

The Superior Oil Company

Address

P. O. Box 3901, Midland, Texas 79702

Reason(s) for filing (Check proper box)

New Well ☒  
Recompletion ☐  
Change in Ownership ☐

Change in Transporter of:

Oil ☐  
Casinghead Gas ☐

Dry Gas ☐  
Condensate ☐

Other (Please explain)

**CASINGHEAD GAS MUST NOT BE  
FLARED AFTER 12-1-83  
UNLESS AN EXCEPTION TO R-4070  
IS OBTAINED.**

If change of ownership give name  
and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL  
DESIGNATED BELOW. IF YOU DO NOT CONCUR  
NOTIFY THIS OFFICE.

## DESCRIPTION OF WELL AND LEASE

|                 |             |                                |                           |               |
|-----------------|-------------|--------------------------------|---------------------------|---------------|
| Lease Name      | Well No.    | Pool Name, including Formation | Kind of Lease             | Lease No.     |
| Mescalero Ridge | 1           | Scharb (Bone Spring)           | State, Federal or Fee Fee |               |
| Location        | Unit Letter | Feet From The                  | Line and                  | Feet From The |
|                 | K           | 1980                           | South                     | 1980          |
|                 |             |                                | West                      |               |
| Line of Section | 17          | Township                       | 19S                       | Range         |
|                 |             |                                | 35E                       | NMPM, Lea     |
|                 |             |                                |                           | County        |

## DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

|   |  |      |      |      |                            |      |
|---|--|------|------|------|----------------------------|------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>         | Address (Give address to which approved copy of this form is to be sent) |      |      |      |                            |      |
| Southern Union Refining Co.   | P.O. Box 980, Hobbs, NM 88240  |      |      |      |                            |      |
| 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) |      |      |      |                            |      |
| Negotiating Contract  |  |      |      |      |                            |      |
| If well produces oil or liquids,<br>give location of tanks.   | Unit   | Sec. | Twp. | Rge. | Is gas actually connected? | When |
|   | K  | 17   | 19S  | 35E  | No                         |      |

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

Reentry

## COMPLETION DATA

|                                    |                             |                 |                   |          |        |           |             |              |
|------------------------------------|-----------------------------|-----------------|-------------------|----------|--------|-----------|-------------|--------------|
| Designate Type of Completion - (X) | Oil Well                    | Gas Well        | New Well          | Workover | Deepen | Plug Back | Same Res't. | Diff. Res't. |
|                                    | X                           |                 | X                 |          |        |           |             |              |
| Date Spudded                       | Date Compl. Ready to Prod.  | Total Depth     | P.B.T.D.          |          |        |           |             |              |
| 7-28-83 Reentry                    | 9-30-83                     | 10,229'         | 10,150'           |          |        |           |             |              |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | Top Oil/Gas Pay | Tubing Depth      |          |        |           |             |              |
| 3838' GR                           | Bone Spring                 | 9882'           | 9840'             |          |        |           |             |              |
| Perforations                       |                             |                 | Depth Casing Shoe |          |        |           |             |              |
| 9882-9903' 43 holes                |                             |                 | 10,229            |          |        |           |             |              |

## TUBING, CASING, AND CEMENTING RECORD

| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | SACKS CEMENT |
|-----------|----------------------|-----------|--------------|
| 24"       | 20"                  | 40'       | Redi-Mix     |
| 17 1/2"   | 13 3/8"              | 600'      | 650          |
| 12 1/2"   | 9 5/8"               | 5400'     | 1600         |
| 8 1/2"    | 5 1/2"               | 10,229'   | 215          |

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 Tanks | Date of Test    | Producing Method (Flow, pump, gas lift, etc.) |            |
| 9-30-83                         | 10-3-83         | Pumping                                       |            |
| Length of Test                  | Tubing Pressure | Casing Pressure                               | Choke Size |
| 24hrs                           | 70              | 25  |            |
| Actual Prod. During Test        | Oil-Bbls.       | Water-Bbls.                                   | Gas-MCF    |
|                                 | 261             | 55  | 226        |

## 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            |
|                                  |                           |                           |                       |

## 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.

OIL CONSERVATION DIVISION

OCT 12 1983

APPROVED \_\_\_\_\_, 19\_\_\_\_

BY ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

TITLE \_\_\_\_\_

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

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

All sections of this form must be filled out completely for all  
able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of use  
well name or number, or transporter, or other such change of condi  
tion.

Separate Form C-104 must be filed for each pool for each  
new well.

Division Operations Superintendent

(Title)

10-7-83

(Date)