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Appropriate District Office
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DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
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

Operator ELK OIL COMPANY		Well API No. 30-025-28224
Address Post Office Box 310, Roswell, New Mexico 88202-0310		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator Fred Pool Drilling, Inc., Post Office Box 1393, Roswell, New Mexico 88202-1393		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Pearl State	Well No. 2	Pool Name, including Formation Southeast Scharb Wolfcamp	Kind of Lease State, Federal or Private Federal	Lease No. LG-889
Location Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East Line Section 10 Township 19S Range 35E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS **SCURLOCK PERMIAN CORP EFF 9-1-91**

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> The Permian Corporation	Address (Give address to which approved copy of this form is to be sent) Post Office Box 1183, Houston, Texas 77001					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Warren Petroleum	Address (Give address to which approved copy of this form is to be sent) Post Office Box Tulsa, Oklahoma 74102					
If well produces oil or liquids, give location of tanks.	Unit J	Sec. 10	Twp. 9S	Rge. 35E	Is gas actually connected? Yes	When? 9/26/83

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 8/21/83	Date Compl. Ready to Prod. 9/16/83		Total Depth 10,800		P.B.T.D. 10,760			
Elevations (DF, RKB, RT, GR, etc.) 3817.6 GR	Name of Producing Formation Wolfcamp		Top Oil/Gas Pay 10,513		Tubing Depth 10,431			
Perforations 10,513-16, 10,519-22, 10,524,28, 10,530-33					Depth Casing Shoe 10,800			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		350		400			
12 1/4"	8 5/8"		3550		2050			
7 7/8"	5 1/2"		10800		550			
	2 7/8"		10431					

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 9/16/83	Date of Test 9/16/83 to 9/17/83	Producing Method (Flow, pump, gas lift, etc.) Flowing	
Length of Test 24 hrs.	Tubing Pressure 60 psi	Casing Pressure Packer	Choke Size 1/2"
Actual Prod. During Test	Oil - Bbls. 384	Water - Bbls. -0-	Gas - MCF 135 mcf

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.

ELK OIL COMPANY

Signature **Joseph J. Kelly, President**
Printed Name **June 2, 1989** Title **(505)623-3190**
Date Telephone No.

OIL CONSERVATION DIVISION

JUN 6 1989

Date Approved

By **ORIGINAL SIGNED BY JERRY SEXTON**
DISTRICT I SUPERVISOR

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 Section I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.