

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form O-104
Superseding OIT C-104 as
Effective 1-1-85

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TRANSPORTER	OIL GAS
OPERATION	
REGISTRATION OFFICE	

MorOilCo., Inc.

P.O. Drawer 1, Artesia, NM 88211-0269

Reason(s) for filing (check proper box)

Other (Please explain)

New Well ☒ Change in Transporter of Oil ☐
Completion ☐ Oil ☐ Dry Gas ☐
Change in Ownership ☐ Casinghead Gas ☐ Condensate ☐

Change of ownership give name
and address of previous owner

DESCRIPTION OF WELL AND LEASE

Well Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease
Stivason Federal	#3	N. San Miguel Seven Rivers Gas	State, Federal, or Free	NM-57285

Unit Letter B 330' Foot From The North Line and 1650' Foot From The East

Line of Section 33 Township 19 Range 34, NMPM, Lea Co.

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

One of Authorized Transporter of Oil ☐ or Condensate ☒	Address (Give address to which approved copy of this form is to be sent)
Navajo Refining Company	P.O. Drawer 159 Artesia, NM 88210
One of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)
Warren Petroleum Company	P.O. Box 1150 Midland, TX 79702
Well produces oil or liquids, give location of tanks.	Is gas actually connected? When
Unit <u>A</u> Sec. <u>33</u> Twp. <u>19</u> Rge. <u>34</u>	Yes May 5, 1986

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

COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Some Other (Specify)
		X	X				
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.M.T.D.				
12/15/85	3/7/86	4630	4590				
Productions (DF, H&U, HF, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth				
3691.9 GR	Seven Rivers		3865				
Productions				Depth Casing Shoe			
3901----08							

TUBING, CASING, AND CEMENTING RECORD

POLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
See well completion Record			

**TEST DATA AND REQUEST FOR
OIL WELL**

ALLOWABLE

(Test must be
able for this depth)

(% of total volume of load oil and must be equal to or exceed 1
for full 24 hours)

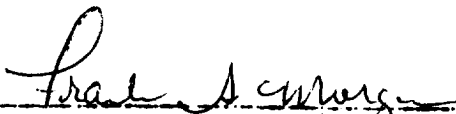
Date First New Oil Run To Tanks	Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil-Bble.	Water-Bble.	Gas-Bble.

GAS WELL

Actual Prod. Test-MCF/D 550 mcf/d	Length of Test 24 hrs	Bble. Condensate/MCF 0	Gravity of Condensate 0
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-In) 460#	Casing Pressure (Shut-In) 0	Choke Size 1/2"

CERTIFICATE OF COMPLIANCE

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


(Signature)

Operator

(Title)

July 18, 1986

(Date)

OIL CONSERVATION COMMISSION

APPROVED AUG 1 1986, 19

BY ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

TITLE _____

This form is to be filed in compliance with RULE 2.1104.

If this is a request for allowable for a newly drilled producing well, this form must be accompanied by a tabulation of the first tests taken on the well in accordance with RULE 1.111.

All sections of this form must be filled out completely for a valid and completed well.

Fill out only Sections I, II, III, and VI for change of well name or number, or transportation or other such change of condition.

RECEIVED
JUL 18 1986
C.C.C.
HOBBS OFFICE