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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Engr. of Minerals and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

OIL CONSERVATION DIVISION

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

**REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS**

I.

Operator PENNZOIL EXPLORATION & PRODUCTION COMPANY		Well API No. 30-025-30413
Address P. O. DRAWER 1828 - MIDLAND, TEXAS 79702-1828		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> New Well <input checked="" type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator <input checked="" type="checkbox"/> Other (Please explain) Approval to flare casinghead gas from this well must be obtained from the BUREAU OF LAND MANAGEMENT (BLM)		
Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate		Request for Allowable

If change of operator give name and address of previous operator _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name LEA CHAPARRAL FEDERAL COM.	Well No. 1	Pool Name, Including Formation Undesignated Bone Spring <i>wildcat</i>	Kind of Lease State Federal <input checked="" type="checkbox"/>	Lease No. NM-60789
Location Unit Letter <u>K</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>1980</u> Feet From The <u>West</u> Line Section <u>33</u> Township <u>19-S</u> Range <u>34-E</u> , <u>NMPM</u> , <u>LEA</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

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) P. O. Box 3119 - Midland, Texas 79702-3119	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> NONE	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 K	Sec. 33
	Twp. 19S	Rge. 34E
	Is gas actually connected? NO	
	When? Unknown at this time.	

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	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 7-19-88	Date Compl. Ready to Prod. 10-01-88	Total Depth 13600		P.B.T.D. 10220' CIBP				
Elevations (DF, RKB, RT, GR, etc.) 3662.6 GR	Name of Producing Formation Bone Spring	Top Oil/Gas Pay 10153		Tubing Depth 9600				
Perforations 10153' to 10162' - 10 holes - 1 JSPF				Depth Casing Shoe 13583				
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2	13-3/8		513		670			
12-1/4	9-5/8		5300		2750			
7-7/8	5-1/2		13680		1400			
	2-7/8		9600					

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 08/22/89	Date of Test 08/30/89	Producing Method (Flow, pump, gas lift, etc.) PUMP	
Length of Test 24 Hours	Tubing Pressure 150	Casing Pressure --	Choke Size --
Actual Prod. During Test 221 bbls.	Oil - Bbls. 118	Water - Bbls. 103	Gas- MCF 20

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.

Signature Roy R. Johnson
Printed Name ROY R. JOHNSON
Date AUGUST 31, 1989
Telephone No. 915-682-7316

OIL CONSERVATION DIVISION

Date Approved SEP 5 1989
By Paul Kautz
Title Geologist

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 only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.