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Appropriate District Office
PISTRICT |
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Departr (

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page 7

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

DISTRICT III ILLU RIO Brazos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

Operator		TOTRA	NSPOF	<u>IT OIL</u>	AND NA	TURAL G	iAS				
•	0							API No.			
Strata Production Company								30-025-30725			
648 Petroleum Building Ro					oswell, New Mexico 88201						
Reason(s) for Filing (Check proper box) New Well		~		_	Out	ner (Please exp	lain)				
=			Transporter	of:							
Recompletion	Oil		Dry Gas	니							
Change in Operator	Casinghe	ad Gas 🗌	Condensate								
f change of operator give name and address of previous operator											
	4 N/D I F										
II. DESCRIPTION OF WELL Lake Name	AND LE		I								
West No. Poor Patie, Includ								Kind of Lease No.			
Location	ason Federal #5 Pearl					Queen State,			Federal or Fee NM 57285		
		5501									
Unit Letter [7]	_ :	220.	Feet From	The $_{W}$	lest Li	nc and66	50'	eet From The	South	line	
. 27							_				
Section 2/ Townsh	1P	19-S	Range	34	-E N	МРМ,	Le	a		County	
II DESIGNATION OF TOAR	JCDADTI	en oe o	II ANIDA								
II. DESIGNATION OF TRAP Name of Authorized Transporter of Oil		or Conden	LL AND	NATU			<u> </u>				
	~ [XX]_	Address (G)	ve address to w	which approve	d copy of this f	orm is to be s	ent)	
Enron Oil Trading & Transportation Name of Authorized Transports of Casinghest Gas or Dry Gas					P.O. Box 1188, Houston, TX 77251-1188						
warren fet		or bry Car			Address (Give address to which approved copy of this form is to be sent)					ens)	
If well produces oil or liquids,	Sec.	Twp. Rge.		Is gas actually connected? When ?							
uve location of tanks.	Undit N	28	198	34E	is gas actual	ly connected?	Whe	-	2 26 06		
this production is commingled with that		her lease or	pool, give or	Omminel	ing order num	her		<u></u>	2-26-89		
V. COMPLETION DATA	•				B Older HAII						
	·····	Oil Well	Gas	Well	New Well	Workover	1 0	1 5. 5 .		_,	
Designate Type of Completion	- (X)	i	1			WORLDASI	Deepen	Plug Back	Same Res'v	Diff Res v	
Date Spudded	Date Com	pl. Ready to	Prod.		Total Depth	1		DDTD	L		
11-5-89	12-18-89			5115'			P.B.T.D.	F.B. 1.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tobas Date				
GL 3709.0' Oueen								Tubing Depth			
								4970 Depth Casing Shoe			
4518 - 4844								laryan Capit	e and		
	· ,	TUBING,	CASING	AND	CEMENTI	NG RECO	RD				
HOLE SIZE	CA	CASING & TUBING SIZE			DEPTH SET				SACKS CEMENT		
1211		8-5/8" 24#			1318' 5115'			450sx PSL "C"			
7-7/8"	3, 13.30							450sx "Lite";			
									380sx "Premium"		
2-7/8"	J-55				4970'			120054	+ Chilam		
TEST DATA AND REQUE	ST FOR A	ALLOWA	ABLE								
OIL WELL Test must be after . Date First New Oil Run To Track	recovery of I	otal volume	of load oil a	nd musi	be equal to or	exceed top al	lowable for th	is depth or be	for full 24 hou	us)	
Alle First New Oil Rus To Tank Date of Test						Producing Method (Flow, pump, gas lift, etc.)					
ength of Test	Tubing D	Tuking Bassass				·					
	I doing Pri	Tubing Pressure			Casing Pressure			Choke Size			
ctual Prod. During Test Oil - Bbls.						Water Dill			- 1/05		
-	Oil · Buis.				Water - Bbis.			Gas- MCF			
GAS WELL	1				l			_1	·	·	
Actual Prod. Test - MCF/D	11 4-35-4	T									
tion ton attend	Length of	1 041			Bbis. Conder	MMCF		Gravity of C	condensate		
Muling Method (pitot, back pr.) Tubing Pressure					TA-7						
sting Method (pilot, back pr.) Tubing Pressure (Shut-in)					Casing Pressure (Shut-in)			Choke Size			
// Oprovence			 -		l,						
VI. OPERATOR CERTIFIC	CATE OF	COMP	LIANCI	Е		04.00.			· · · · · · · · · · · · · · · · · · ·		
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					
/. · · · · · · · · · · · · · · · · · · ·					Date Approved						
The state of the	13.	12. 1					, u				
Sungs. M. Delang					י.ם				4814-5		
Signature James G. McClelland VP-Administration					By DEIGHAL SIGNED BY JERRY SEXTON						
Printed Name Title					in that is being a 20%						
October 11, 1990	į.	505 62	2-112	7	Title						
Date			phone No.								
					H						

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.