

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Manzano Oil Corporation 505/623-1996		Well API No. 30-025-30763
Address P.O. Box 2107/Roswell, NM 88202-2107		
Reason(s) for Filing (Check proper box) New Well ☒ Recompletion ☐ Change in Operator ☐		☒ Other (Please explain) 1200 bbls Test allowable - April 1990 Request to Transport
Change in Transporter of: Oil ☐ Dry Gas ☐ Casinghead Gas ☐ Condensate ☐		

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name Texaco Federal	Well No. 1	Pool Name, including Formation Tonto Wolfcamp	Kind of Lease State, Federal or Fee	Lease No. NM-56749
Location Unit Lessor K : 2060 Feet From The South Line and 1980 Feet From The West Line Section 14 Township 19 South Range 33 East, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Texaco Trading & Transportation, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 60628, Midland, Texas 79711-0628					
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☐ Unknown	Address (Give address to which approved copy of this form is to be sent) -----					
If well produces oil or liquids, give location of leaks	Unit K	Sec. 14	Twp. 19S	Rge. 33E	Is gas actually compressed? No	When? Unknown

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation Wolfcamp		Top Oil/Gas Pay			Tubing Depth		
Performance 11,100 - 11,130						Depth Casing Stems		

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Flowing 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.

Sharon M. Williams

Signature
Production Clerk

Printed Name
Sharon M. Williams

Title
505/623-1996

Date
April 11, 1990

Telephone No.

OIL CONSERVATION DIVISION
APR 17 1990

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

RECEIVED
APR 12 1999
DOJ
ACCESS OFFICE