

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. 30-025-31047
Address P.O. Box 2107/Roswell, NM 88202-2107			
Reason(s) for Filing (Check proper box) ☐ Other (Please explain)			
New Well ☒	Change in Transporter of:		
Recompletion ☐	Oil ☐	Dry Gas ☐	
Change in Operator ☐	Casinghead Gas ☐	Condensate ☐	

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Sun Pearl Federal	Well No. 4	Field Name, including Formation Pearl Queen	Kind of Lease XXXX Federal XXXX XXXX	Lease No. NM-56263
Location Unit Letter <u>H</u> : <u>2310</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>East</u> Line Section <u>28</u> Township <u>19S</u> Range <u>34E</u> NMPN Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name 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
Name 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 1589, Tulsa, OK 74102
If well produces oil or liquids, give amount of lease Unit <u>H</u> Sec. <u>28</u> Twp. <u>19S</u> Rge. <u>34E</u>	Is gas actually consorted? <u>Yes</u> When? <u>12-07-90</u>

If this production is commingled with that from any other leases or pool, give commingling order number: _____

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well ☒	Gas Well ☐	New Well ☒	Workover ☐	Deepen ☐	Plug Back ☐	Stim. Treat. ☐	Perf. Treat. ☐
Date Spudded 11-25-90	Date Compl. Ready to Prod. 12-07-90		Total Depth 5190		P.H.T.D. 5066			
Equipment (DF, RCB, RT, CR, etc.) 3712 GL; 3723 KB	Name of Producing Formation Penrose		Top Oil/Gas Pay 4785		Tubing Depth 4864			
Performance 4829-37 & 4785-89					Depth Casing String 5190			

TUBING, CASING AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12-1/4"	8-5/8" csg	1365 KB	400 sx Hal lite & 200 sx Class C
7-7/8"	5-1/2" csg	5190 KB	850 sx lite & 575 sx 50/50
	2-3/8" tbg	4864 KB	Poz

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of liquid 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 12-18-90	Date of Test 12-18-90	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hrs	Tubing Pressure 15 psi	Casing Pressure 15 psi	Casing Size Open
Actual Prod. During Test	Oil - Bbls 50	Water - Bbls 30	Gas - MCF 22

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Commingled/Mth/MCF	Gravity of Commingled
Producing Method (pump, back pr.)	Tubing Pressure (Static)	Casing Pressure (Static)	Casing 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.

Allison Rolfe
Signature
Production Clerk Allison Rolfe
Printed Name
1-30-91 505/623-1996
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved _____

By _____

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.