

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

State of New Mexico
Energy, 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

Operator GREENHILL PETROLEUM CORPORATION		Well API No. 30 025 31264
Address 11490 Westheimer, Suite 200, Houston, Texas 77077		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name West Lovington Unit	Well No. 80	Pool Name, Including Formation W. Lovington Upper San Andres	Kind of Lease <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal or Fee	Lease No. B4119
Location Unit Letter M : 156 Feet From The South Line and 15 Feet From The West Line Section 4 Township 17S Range 36E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2528, Hobbs, New Mexico 88240	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips 66 Natural Gas Company GPM Gas Corporation	Address (Give address to which approved copy of this form is to be sent) 4001 Fendrick, Odessa, Texas 79762	
If well produces oil or liquids, give location of tanks.	Unit	Soc.
	Twp.	Rge.
		Is gas actually connected? yes
		When? 10-3-91

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 XX	Gas Well	New Well XX	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 8-10-91	Date Compl. Ready to Prod.		Total Depth 5230'			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.) 3882	Name of Producing Formation San Andres		Top Oil/Gas Pay			Tubing Depth 4700		
Perforations 4717-5143						Depth Casing Shoe		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT		
12 1/4	8 5/8		365			300		
7 7/8	5 1/2		5230			1500		

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)

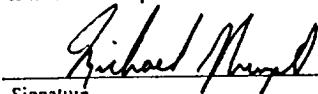
Date First New Oil Run To Tank 10-3-91	Date of Test 10-3-91	Producing Method (Flow, pump, gas lift, etc.) Rod	
Length of Test 24 hours	Tubing Pressure -----	Casing Pressure -----	Choke Size -----
Actual Prod. During Test 239	Oil - Bbls. 2	Water - Bbls. 237	Gas - MCF TSTM

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
Michael J. Newport-Land Mgr.-Permian Basin

Printed Name
10-30-91 713 589-8484

Date
Telephone No.

OIL CONSERVATION DIVISION

NOV 12 1991

Date Approved

By ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I - ALBUQUERQUE

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.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.