Submit 5 Copies
Appropriate District Office
DISTRICT 1
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
P.O. Box 2088
Santa Fe. New Mexico. 87504-2088

DISTRICT II P.O. Drawer DD, Anexia, NM 88210	P.O. Be Santa Fe. New M	ox 2088 exico 87504-2088				
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	REQUEST FOR ALLOWAR	BLE AND AUTHORIZA	ATION			
1.	TO TRANSPORT OIL	_AND NATURAL GAS		I Na		
Operator GREENIIILL PETROLEUM CO		wen Ai	30 025 31550			
4.11	te 200, Houston, Texas	77077				
Reason(x) for Filing (Check proper box)	oc zoo, medicin,	Other (Please explain)			
New Well Xk	Change in Transporter of: Oil Dry Gas					
Recompletion	Oil Dry Gas Casinghead Class Condensate					
If change of operator give name and address of previous operator						
II. DESCRIPTION OF WELL A	AND LEASE					
Lease Name Lovington San Andres Un		ling Formulon Grayburg San Andr	es Kind of	Lease ederal or Fee	B 23	se No. 59
Location B	 ·	North Line and 2490			<u>East</u>	Une
Unit Letter	175 - 265	. МЧММ,			Lea	County
Section Township		UDAL CAR				<u>. </u>
Name of Authorized Transporter of Oil	or Condensate	Montess Conse mon cas to min	ch opproved	copy of this for NM QQ2A1	m is to be sen	u)
Texas New Mexico Pipel	ine Company	P. O. Box 2528,	ch approved	copy of this for	m is to be sen	u)
Name of Authorized Transporter of Casing GPM Gas Corporation		Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, TX 79762				
If well produces oil or liquids,		e. Is gas actually connected?				
pive location of tanks.	B 1 175 36E		10-1	8-92		
If this production is commingled with that I IV. COMPLETION DATA	from any other rease or poor, give contains					Total Basin
	Oil Well Gas Well	New Well Workover	Deepen	Plug Back	Same Res'v	Din Res'v
Designate Type of Completion Date Spudded	- (X) XXX Date Compl. Ready to Prod.	Total Depth		P.B.T.D.		
5-17-92	6-18-92	5095'			5048'	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Gas Pay		Tubing Depth 4978		
3830 GR	San Andres				Depth Casing Shoe	
4618-5032						
4018-3032	TUBING, CASING AN	D CEMENTING RECORD DEPTH SET	D	5	ACKS CEM	ENT
HOLE SIZE	CASING & TUBING SIZE 8 5/8" 24#	1320		500 sacks		
12 1/4" 7 7/8"	8 5/8" 24# 5 1/2" 15,5#	5095'			100 sacks	
1 1/8	J 174 10.01		·	-		
V. TEST DATA AND REQUE	FROR ALLOWABLE			.L		
OIL WELL (Test must be after t	recovery of total volume of load oil and m	usi be equal to or exceed top allo	mable for the	is depth or be j	for full 24 hou	rs.)
Date First New Oil Run To Tank	Date of Test 7-10-92	Producing Method (Flow, purplemp)	vryr, gas iyi,	,		
6-16-92	Tubing Pressure	Casing Pressure		Choke Size		
Length of Test 24 hours		Water Dille	Water - Bbls.		Gas- MCF	
Actual Prod. During Test 386	Oil - Dbls. 38	348		TSTM		
GAS WELL					.,	
Actual Frod. Test - MCI7D	Length of Test.	Bbls. Condensate/MMCF		Gravity of G	Condensale	
lesting Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)		Choke Size		
VI. OPERATOR CERTIFIC	L CATE OF COMPLIANCE	OIL CON	ICEDV	ATION	DIVISIO	DN.
I hereby certify that the rules and regularities have been compiled with and				11.0		
is true and complete to the best of my	knowledge and belief.	Date Approve	ed		JUL 2 (92
Michael Meny	- By	Č	drig. Signe	d by		
			<u>Paul Kar</u> Geolog i	11 124 134		
Michael J. Newport-Le	and MgrPermian Basin	- Title		_	-	
7-14-92	(713) 589-8484	-				
Date	Telephone No.	1				

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.