

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Amtex Energy, Inc.		Well API No. 30-025-31775
Address P. O. Box 3418, Midland, TX 79702		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> <input 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 checked="" type="checkbox"/> Condensate <input type="checkbox"/> <input checked="" type="checkbox"/> Other (Please explain) <i>designate gas transporter & show gas connect date</i>		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name Record	Well No. 1	Pool Name, Including Formation Pearl - San Andres	Kind of Lease State, Federal or Fee	Lease No. N/A
Location Unit Letter <u>K</u> : <u>2030</u> Feet From The <u>South</u> Line and <u>2310</u> Feet From The <u>West</u> Line Section <u>26</u> Township <u>19S</u> Range <u>35E</u> , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Scurlock Permian Corporation	Address (Give address to which approved copy of this form is to be sent) P. O. Box 838, Hobbs, NM 88240	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> GPM Gas Corporation	Address (Give address to which approved copy of this form is to be sent) 151-A Phillips Bldg. Annex, Bartlesville, OK	
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 26
	Twp. 19S	Rge. 35E
	Is gas actually connected? <u>No</u> <u>Yes</u>	When? <u>4-21-93</u>

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 <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input checked="" type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v <input type="checkbox"/>	Diff Res'v <input type="checkbox"/>
Date Spudded 11/5/92	Date Compl. Ready to Prod. 3/1/93		Total Depth 11,394'		P.B.T.D. 6,460'			
Elevations (DF, RKB, RT, GR, etc.) 3710' GR	Name of Producing Formation San Andres		Top Oil/Gas Pay 4,776'		Tubing Depth 5,220'			
Perforations 5,277' - 5,289'					Depth Casing Shoe 11,394'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17.50"	12.75"		350'		415sx CI"C" w/2% CaCL			
11.00"	8.625"		3,560'		1,350sxHal.Lt.+270sxPremCaCL			
7.875"	5.50"		11,394'		3 stages pumped 795sxH. 1st			
					780sxPrem. 2nd. & 775sx			

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 3/1/93	Date of Test 3/2/93	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hours	Tubing Pressure 35 psi.	Casing Pressure 0 psi.	Choke Size 29/64
Actual Prod. During Test 73 BO	Oil - Bbls. 73	Water - Bbls. 41	Gas - MCF 153
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.

William J. Savage
Signature
William J. Savage President
Printed Name
4/23/93 Title
Date (915) 686-0847
Telephone No.

OIL CONSERVATION DIVISION

APR 28 1993

Date Approved

Orig. Signed by
By Paul Kautz
Geologist

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.