

District I
PO Box 1900, Hobbs, NM 88241-1900

Disturbances II

NO Drawer DD, Artesia, NM 88211-0719

District III

1000 Elm Branch Rd., Aztec, NM 87410

District IV

PO Box 2088, Santa Fe, NM 87504-2088

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

Form C-104

Revised February 10, 1994

Instructions on back

Submit to Appropriate District Office

5 Copies

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

| | | | | | |
|---|--|--|--|------------------------------|--|
| Mallon Oil Company P.O. Box 3256 Carlsbad, NM 88220 | | THIS WELL HAS BEEN PLACED IN THE POOL DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE. | | OGRID Number 013925 | |
| API Number 30 - 0 25-32606 | | Pool Name Northeast Lee Delaware | | Reason for Filing Code NW | |
| Property Code 15398 | | Property Name Mallon 34 Federal | | Pool Code 37584 | |
| | | | | Well Number 2 | |

II. ¹⁰ Surface Location

| U/I or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South Line | Feet from the | East/West line | County |
|----------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| A | 34 | 19S | 34E | N/A | 660' | North | 660' | East | Lea |

11 Bottom Hole Location

| | | | | | | | | | |
|---------------|-------------------------|----------|-----------------------|---------|-----------------------|------------------|------------------------|----------------|-------------------------|
| UL or lot no. | Section | Township | Range | Lot Idn | Feet from the | North/South Line | Feet from the | East/West line | County |
| A | 34 | 19S | 34E | N/A | 660' | North | 660' | East | Lea |
| " Lec Code | " Producing Method Code | | " Gas Connection Date | | " C-129 Permit Number | | " C-129 Effective Date | | " C-129 Expiration Date |
| F | P | | N/A | | N/A | | N/A | | N/A |

III. Oil and Gas Transporters

| " Transporter OGRID | " Transporter Name and Address | " POD | " O/G | " POD ULSTR Location and Description |
|------------------------|---|----------|-------|---|
| 12426 | Kelly McLaskey Oilfield Services P.O. Box 580 Hobbs, NM 88241 | 28/3424 | 0 | D-34-19-34 N/A |
| | Approval to flare casinghead gas from this well must be obtained from the BUREAU OF LAND MANAGEMENT (BLM) | | | |
| | | | | |
| | | (28/3425 | G) | |

IV. Produced Water

| | |
|------------------|--|
| " POD 2813426 | " POD ULSTR Location and Description Unit A, Sec. 34, T19S-R34E |
|------------------|--|

V. Well Completion Data

| | | | | |
|-------------|------------------------|-------------|----------------|----------------------------|
| " Spud Date | " Ready Date | " TD | " PBTD | " Perforations |
| 9/13/94 | 10/30/94 | 6313' | 6313' | 5878'-5900' 5936'-5946' |
| " Hole Size | " Casing & Tubing Size | " Depth Set | " Sacks Cement | |
| 14-3/4 | 9-5/8 K55 | 1517' | 850 | |
| 7-7/8 | 5-1/2 J55 | 6312' | 1415 | |
| | | | | |
| | | | | |

VI. Well Test Data

| | | | | | |
|----------------------------|----------------------------|-------------------------|-------------------------|------------------------|------------------------|
| " Date New Oil 10/30/94 | " Gas Delivery Date N/A | " Test Date 10/22/94 | " Test Length 12 hrs | " Tbg. Pressure N/A | " Csg. Pressure N/A |
| " Choke Size N/A | " Oil 96 | " Water 384 | " Gas 0 | " AOF 0 | " Test Method S |

"I hereby certify that the rules 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: James C. Winkler

Printed name: Duane C. Winkler

Title: Production Superintendent

| | | | |
|-------|---------|--------|--------------|
| Date: | 11/2/94 | Phone: | 505-885-4596 |
|-------|---------|--------|--------------|

OIL CONSERVATION DIVISION

Approved by: **ORIGINAL SIGNED BY JERRY SEXTON**

Title: DISTRICT 1 SUPERVISOR

Approval Date: NOV 08 1994

^a If this is a change of operator fill in the OGRID number and name of the previous operator

| | | | |
|-----------------------------|--------------|-------|------|
| Previous Operator Signature | Printed Name | Title | Date |
|-----------------------------|--------------|-------|------|

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6/20