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

State of New Mexico Energy, Minerals and Natural Resources Depar

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

DISTRICT III 1000 Rio Brizos Rd., Aztec, NM 87410

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

| I. | • | TO TRAN | SPORT O | L AND NAT | URAL G | | | | | | |
|--|--|----------------------------|--------------------------|---------------------------------------|-------------------|--|-------------------------|------------------|--|--|--|
| Openior Xeric Oil & Gas Company | | | | | | 3 | II API No. 30-025-03 | 317 | | | |
| Address | ily . | | · | | | | 00 020 00 | | <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u> | | |
| P. O. Box 51311, Midl | and, Te | xas 79 | 710 | | | | | | | | |
| Reason(s) for Filing (Check proper box) New Well | | Change in Tr | anencetes of: | Other | (Please expl | (ain) | | | | | |
| Recompletion | Oil | · · · · · · | ry Gas | | | | | | | | |
| Change in Operator | Casinghead | _ | ondensate | | (Effe | ctive | November | 1, 1989) | | | |
| If change of operator give name and address of previous operator | arack P | etroleur | n Co., In | c., 500 W | . Texas | , Ste. | 1485, Mi | dland, T | X 79701 | | |
| IL DESCRIPTION OF WELL | ANDIFA | CF | | | | | | | | | |
| Lease Name | ding Formation | | | d of Lease No. | | | | | | | |
| South Pearl Queen Uni | en ! | | | Federal or Fee LC 0349793 | | | | | | | |
| Location | . 198 | Λ | c | outh | 660 | ٦. | • | Most | | | |
| Unit Letter | - : 1 30 | <u> </u> | et From The 🔑 | outh Line | and | <u>, </u> | Feet From The | West | Line | | |
| Section 3 Townshi | p 20-S | R: | inge 35-1 | E, NM | PM, | Lea | | | County | | |
| III. DESIGNATION OF TRAN | SPORTE | R OF OIL | AND NATE | RAL GAS | | | | | | | |
| Name of Authorized Transporter of Oil | (Y) | or Condensate | | | address to wi | hich approv | ed copy of this fo | xm is to be se | ni) | | |
| Shell Pipe Line Compan | P. O. Box 2648, Houston, Texas 77252 | | | | | | | | | | |
| Name of Authorized Transporter of Casis | Address (Give address to which approved copy of this form is to be sent) | | | | | | | | | | |
| Warren Petroleum Corpo If well produces oil or liquids, | P. O. Box 1589, Tulsa, Oklahoma 74102 Is gas actually connected? When ? | | | | | | | | | | |
| give location of tanks. | jji | 4 j20 | vp. Rge.)-S 35-E | Yes | | <u>i</u> F | ebruary 1 | , 1961 | | | |
| If this production is commingled with that IV. COMPLETION DATA | from any other | r lease or poo | l, give comming | ling order numbe | r | ==-/ | | | · | | |
| IV. COMPLETION DATA | | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v | Diff Res'v | | |
| Designate Type of Completion | | İ | Ì | i i | | İ | | | | | |
| Date Spudded | Date Compl | Date Compl. Ready to Prod. | | | Total Depth | | | P.B.T.D. | | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Pro | ducing Forms | tion | Top Oil/Gas Pay | | | Tubing Dept | Tubing Depth | | | |
| | | | | | | | | | | | |
| Perforations | | | | Depth Casing | Depth Casing Shoe | | | | | | |
| | TT | IBING, CA | SING AND | CEMENTING | G RECOR | D | | • | | | |
| HOLE SIZE | T | NG & TUBIN | | DEPTH SET | | | SACKS CEMENT | | | | |
| | | | | | | | | | | | |
| | | | | | | | | ··· | | | |
| | | | | | | | | | | | |
| V. TEST DATA AND REQUES | | | | · · · · · · · · · · · · · · · · · · · | ············ | | | | | | |
| OIL WELL (Test must be after re Date First New Oil Run To Tank | Date of Test | l volume of lo | ad oil and must | | | | | or full 24 hours | 3.) | | |
| Dete HR 144 OH KUR 10 1 KUR | Producing Method (Flow, pump, gas lift, etc.) | | | | | | | | | | |
| ength of Test Tubing Pressure | | | | Casing Pressure | | | Choke Size | Choke Size | | | |
| onul Book During Test | | | Water - Bola | | | Gas- MCE | Gas- MCF | | | | |
| Actual Prod. During Test Oil - Bbls. | | | | Water - Born | | | | | | | |
| GAS WELL | | | | | | | | | | | |
| Actual Prod. Test - MCF/D | Length of Te | d | | Bbis. Condensat | e/MMCF | | Gravity of C | ondensate | | | |
| | | | (65.4 =) | | | | | | | | |
| esting Method (pitot, back pr.) Tubing Pressure (Shut-in) | | | | Casing Pressure (Shut-in) | | | Choke Size | Cioke Size | | | |
| AL OPERATOR CERTIFICA | ATE OF (| OMPL I | ANCE. | | | | | | | | |
| I hereby certify that the rules and regular | tions of the Oi | l Conservatio | 0 | 01 | L CON | SERV | 'ATION [| DIVISIO | N | | |
| Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. | | | | Date Approved NOV 1 5 1989 | | | | | | | |
| 1 1 1 1 | 7 | | | Date A | pproved | | / 1 | 0116 | י וטמא_ | | |
| - Landel Con | On a clamad her | | | | | | | | | | |
| Signature Courses | | | | By Orig. Signed by Paul Kautz | | | | | | | |
| Printed Name | · · · · · · · · · · · · · · · · · · · | | unen | Title | | | Geold |)gis t | | | |
| 7/-7-59 Date | | 7/5-68: Telephoo | 7 - 3/2/ e No. | | | | | | | | |
| | | | 1 | 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.