## STATE OF NEW MEXICO ENERGY NO MINERALS DEPARTMENT

DISTRIBUT	Dw	1	
SANTA PE		!	
FILE		1	
V.8.0.5.		1	
LAND OFFICE			
TRANSPORTER	OIL		
		Į	
OPERATOR		1	
PROBATION OFFICE			

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## OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 05-01-83 Page 1

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operater	Graham Royalty, Ltd.	
Adares 1	One Barclay Plaza, Suite 400, 1675 Las Denver, Colorado 80202	
Reeson(s) for filing (C	heck proper box /	Other (Pieuse espiain)
Nov Well Requestion X Change in Owners	Change in Transporter of: Oil Dry Gas hip Casinghead Gas Condensate	Effective Date of Change of Operator <u>July 1. 1987</u>
X Change in Owners	hip Casingheed Gas Concensation	of Operator <u>July 1, 1987</u>

If change of ownership give northe Petro-Lewis Corporation, P.O. Box 90500, Houston, Texas 77290

L DESCRIPTION OF W		Well No.; Po	ool Name, inclusin	Pormation	,	Kind of Lease	Lease No
Cooper B		10 Ma	onument Bli	inebry		Stote, Federal or Fee Fee	
Location	330	Feet From 7	North	Line and _	960	Feel From The West	
Line of Section 7	Township	20S	Range	37E	, NMPM.	Lea	County

Shell Pipeline Corp.	P.O. Box 2648 Houston, TX 77252	
Name of Authorized Transporter of Casingneac Gas or Dry Gas El Paso Natural Gas	Acaress (Give address to which approved copy of this form is to be sent; P.O. Box 1492 El Paso TX 79978	
If well produces oil or liquids, give location of tanks. High JA 12 JO 36	la gas octually connicted? When	

If this production is commingled with that from any other lease or pool, give commingling order number: PC-353

NOTE: Complete Parts IV and V on reverse side if necessary.

## VI. 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 is true and complete to the best of my knowledge and belief.

Graham Revalty, Ltd.	
By: A Jour	A. J. Reves
(Signature)	
Division Manager	
(Tisle)	
July 6, 1987	
(Date)	

CONSERVATION DIVISION
ORIGINAL SIGNED BY JERRY SEXTON DISTRICT L SUPERVISOR

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.  $\sigma_{t}$ 

Fill out only Sections I. II. III, and VI for changes of owner, well name or number, or transporter, drother such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

DISTRIBUTION			Form C-104
FILE	REQUES	T FOR ALLOWABLE	Supersedes Old C-104 and C-11 Effective 1-1-65
U.S.G.S.		AND RANSPORT OIL AND NATURAL	
LAND OFFICE		RANSPORT OIL AND NATURAL	GAS
TRANSPORTER			
GAS			
PRORATION OFFICE			
Dperator			
	Corporation		
Address		-	
P.O. Box 50 Reason(s) for filing (Check pi			
New Well	Change in Transporter of:	Other (Please explain)	
Recompletion	Oil Dry	Gas	
Change in Ownership XX	Casinghead Gas Cond	densate	
If change of ownership give and address of previous own		pration 525 Midland Towe	er, Midland, Texas 7970l
II. DESCRIPTION OF WELL	Well No. Pool Name, Including	Formation Kind of Lea	\$P
Cooper "B"	10 Monument-Bl		ral or Fee Fee
Location			
Unit Letter D	330 Feet From The North	ine and Feet From	The
Line of Section 7	Township 20-S Range	37-E , NMPM	Lea County
III. DESIGNATION OF TRAN	SPORTER OF OIL AND NATURAL G	Adress (Give address to which appr	aved capy of this form is to be seen
Shell Pipel	ine Company	P.O. Box 2648 . Housto	on, Texas 77001
Name of Authorized Transport	er of Casinghead Gas 🔯 or Dry Gas 🗔	Address (Give address to which appro	oved copy of this form is to be sent)
Warren Petr	oleum Corporation	P.O. Box 1589, Tulsa,	Oklahoma 74102
If well produces oil or liquids give location of tanks.	Unit Sec. Twp. Ege.	is gas actually connected? W	her.
If this production is commin IV. COMPLETION DATA	gled with that from any other lease or pool	, give commingling order number:	
Designate Type of Co	$\frac{\text{Oil Well}}{\text{Gas Well}}$	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'v.
Date Spudded	Date Compl. Ready to Prog.	Tant Deet	
· · · · · · · · · · · · · · · · · · ·		Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR	, etc., Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations	· · · · · · · · · · · · · · · · · · ·		Depth Casing Shoe
	TUBING, CASING, AN	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
		· · · · · · · · · · · · · · · · · · ·	
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
V. TEST DATA AND REQU	EST FOR ALLOWABLE (Test must be	after recovery of total volume of load oil	and must be equal to or exceed top allow-
OIL WELL Date First New Oil Run To Ta	able for this d	epth or be for full 24 hours) Producing Method (Flow, pump, gas li	
Length of Test	Tubing Presaure	Casing Pressure	Choke Size
Actual Prod. During Test	011 - Bble.	Water-Bbis.	Gas - MCF
I			
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bble Carles and the	
Actual Prod. Test-MCF/D	Length of lest	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.	) Tubing Pressure (Shut-in)	Casing Pressure (Shut-i.n.)	Choke Size
I. CERTIFICATE OF COMP	LIANCE		TION COMMISSION
		APPROVED ALI	24 1978
Commission have been comp	s and regulations of the Oil Conservation blied with and that the information given		
above is true and complete	to the best of my knowledge and belief.		.EG <b>G</b>
			NSP.
6		This form is to be filed in c	compliance with RULE 1104.
_ Mary /	7 Jenon	If this is a request for allow	able for a newly drilled or deepened
/ -/	(Signature)	well, this form must be accompany tests taken on the well in accord	nied by a tabulation of the deviation
Manager, Oil	& Gas Accounting	All sections of this form mut	at be filled out completely for allow-
August 17, 1		able on new and recompleted we	lls. , III, and VI for changes of owner,
<u>August 17, 1</u>	(Date)		, III, and VI for changes of owner, er, or other such change of condition.
	·· .	Separate Forms C-104 must	be filed for each pool in multiply