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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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

perator OLSEN ENERGY, INC.,	Well API No. N/A
dressed 16414 San Pedro, Suite 470, San Antonio, Tx., 78232	
ason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
ew Well <input type="checkbox"/>	Change in Transporter of:
ecompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
hange in Operator <input checked="" type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
hange of operator give name d address of previous operator	Texaco, Inc., P.O. Box 728, Hobbs, N.M. 88240.

DESCRIPTION OF WELL AND LEASE				
ase Name B. V. Lynch "A" Federal	Well No. 1	Pool Name, Including Formation Lynch-Yates Seven Rivers	Kind of Lease <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other	Lease No. LC-029519-(A)
ocation Unit Letter J : 2310 Feet From The south Line and 2310 Feet From The east Line Section 34 Township 20S Range 34E , NMPM, Lea County				

I. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS						
ame of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)				
Texas-New Mexico Pipeline Company		P.O. Box 2528, Hobbs, N.M. 88240				
ame of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>		Address (Give address to which approved copy of this form is to be sent)				
well produces oil or liquids, ve location of tanks.	Unit J	Sec. 34	Twp. 20-S	Rge. 34-E	Is gas actually connected? No	When ?
this production is commingled with that from any other lease or pool, give commingling order number:						CTB-248

. COMPLETION DATA								
Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
ate Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
levations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
erforations					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

. TEST DATA AND REQUEST FOR ALLOWABLE			
IL 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.)			
ate First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
esting 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.	
Signature Dick Morton	Drilling & Prod'n Manager
Printed Name Jan 27, 1989	Title 512 496-2466
Date	Telephone No.

OIL CONSERVATION DIVISION	
Date Approved JAN 31 1989	
By ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR	
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.

1. [illegible]
2. [illegible]

21. 1. 1989

JAN 30 1989

OCD
MOBBS OFFICE