

Form C-104
District Office
Box DD, Artesia, NM 88210
Form C-104
Box Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Office Engineering Corp		Well API No.
122 W. Taylor, N.M. 88240		
Business (Check proper box) <input checked="" type="checkbox"/> Other (Please explain)		
Oil <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/> Dry Gas <input type="checkbox"/>	Transportation of 80 Bbls of Misc
Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>	Hydrocarbons to Jasco on 3-23-92
Signature of operator give name		
Address of previous operator		

DESCRIPTION OF WELL AND LEASE

Name Hobbs	Well No. 15	Pool Name, Including Formation	Kind of Lease State, Federal or Fee	Lease No.
Unit Letter E : 840 Feet From The W Line and 1650 Feet From The N Line				
Section 15 Township 19 Range 38, NMPM, County				

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

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)				
Bandera Petroleum Inc.	P.O. Box Hobbs N.M. 88240				
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)				
Unit	Soc.	Twp.	Rge.	Is gas actually connected?	When ?

Production is commingled with that from any other lease or pool, give commingling order number:

COMPLETION DATA

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

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

TEST DATA AND REQUEST FOR ALLOWABLE

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.)			
New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Test	Tubing Pressure	Casing Pressure	Choke Size
During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF
WELL			
Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

OPERATOR CERTIFICATE OF COMPLIANCE

I 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.

Billy Walker
Billy Walker Foreman
Name Title
3-23-92 393-9174
Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAR 23 '92
By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR
Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

All sections of this form must be filled out for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

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

RECEIVED
MAR 23 1992
OCD HOBBS OFFICE