DISTRIBUTION NEW MEXICO OIL CONSERVATION COM ANTAFE REQUEST FOR ALLOWABLE Supersedes Old C-104 and C-110 ILE AND .s.g.s. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS AND OFFICE TRANSPORTER GAS OPERATOR PRORATION OFFICE Operator Grace Petroleum Corporation O. Drawer 2358, Midland, Texas Reason(s) for filing (Check proper box) Other (Please explain) New Well Dry Gas Change in Ownership Casinghead Gas Condensate If change of ownership give name and address of previous owner ___ 6228 II. DESCRIPTION OF WELL AND LEASE Lease No Surface -Felmont Federal Salt Lake Morrow, South State, Federal or Fee Fee * 660 Feet From The South Line and 760 East Unit Letter Feet From The Township 20**-**S 32**-**E Line of Section Range Lea County Bottom Hole location is under Federal Lease NM-15907. III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Oil Western Crude Oil, Inc. Name of Authorized Transporter of Casinghead Gas or Dry Gas X 0. Box 1142, Midland, Texas 79702 acess (Give address to which approved copy of this form is to be sent) Gas Company of New Mexico First International Bldg., Dallas, Tx. Sec. Twp. s gas actually connected? If well produces oil or liquids, 20-S 32-E give location of tanks. 2-22-80 If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Gas Well New Well Plug Back | Same Restv. Diff. Restv. Designate Type of Completion - (X) Date Spudded Date Compl. Ready to Prod. Total Depth 7-23-79 Elevations (DF, RKB, RT, GR, etc.) 1-22-80 14417' MD; 13612' TVD 14331' MD; 13532' TVD , Name of Producing Formation Top Oil/Gas Pay Tubing Depth 3587' GR; 3606' KB 14031' 13864' Morrow Depth Casing Shoe Perforations 14031-14039' (9 holes); 14097-14111' (15 holes); 14279-14287' (9 holes 14387' TUBING, CASING, AND CEMENTING RECORD CASING & TUBING SIZE DEPTH SET HOLE SIZE SACKS CEMENT 20" 1208 26" 2210 sx (circ) <u>175"</u> 2776' 1730 sx 13 3/8" 9 5/8" 1st-825sx; 2nd-975sx(cir DV tool @ 3191' 5½ 14387 1350 sx (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow able for this depth or be for full 24 hours) TEST DATA AND REQUEST FOR ALLOWABLES" OIL WELL Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tanks Date of Test Choke Size Length of Test Tubing Pressure Casing Pressure Actual Prod. During Test Oil - Bbls Water - Bbis. Gge - MCF **GAS WELL** Length of Test Bbls. Condensate/MMCF Gravity of Condensate Actual Prod. Test-MCF/D 24 hrs 13.2 2200 58.0 Casing Pressure (Shut-in) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) Choke Size 12/64" Orifice Meter 4455

VI. CERTIFICATE OF COMPLIANCE

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Manage (Title)

> 2-27-80 (Date

OIL CONSERVATION COMMISSION

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

If this is a request for allowable for a newly drilled or deep 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.

Fill out only Sections I. II. III, and VI for changes of owner, well name or number, or transporter, or other such change of condition. Separate Forms C-104 must be filed for each pool in multiply