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

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

| | | |
|-----------------------------------------------------------------------------------------|-----------------------------------------|-------------------------------------|
| Operator Nearburg Producing Company | | Well API No. 30-025-31338 |
| Address P. O. Box 823085, Dallas, Texas 75382-3085 | | |
| Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain) | | |
| New Well <input checked="" type="checkbox"/> | Change in Transporter of: | |
| Recompletion <input type="checkbox"/> | Oil <input type="checkbox"/> | Dry Gas <input type="checkbox"/> |
| Change in Operator <input type="checkbox"/> | Casinghead Gas <input type="checkbox"/> | Condensate <input type="checkbox"/> |
| If change of operator give name and address of previous operator | | |

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------|---------------|------------------------------------------------------|----------------------------------------|----------------------|
| Lease Name LEO 30 FEDERAL COM | Well No. 1 | Pool Name, Including Formation OSUDO MORROW NORTH | Kind of Lease State, Federal or Fee | Lease No. NM55983 |
| Location Unit Letter J : 1980 Feet From The SOUTH Line and 1650 Feet From The EAST Line Section 30 Township 19S Range 36E , NMPM, LEA County | | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|------------|-------------|-------------|-----------------------------------|-------------------|
| Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) P. O. Box 3109, Midland, Texas 79702 | | | | | |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) P.O. Box 26400, ALBUQUERQUE, NM 87125 | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit J | Sec. 30 | Twp. 19S | Rge. 36E | Is gas actually connected? YES | When? 10/11/91 |

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

IV. COMPLETION DATA

| | | | | | | | | |
|-------------------------------------------------|---------------------------------------|--------------------------|-------------------|-----------------------|--------|-----------|------------|------------|
| Designate Type of Completion - (X) | Oil Well | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v | Diff Res'v |
| | | X | X | | | | | |
| Date Spudded 7/31/91 | Date Compl. Ready to Prod. 9/29/91 | Total Depth 12,250 | | P.B.T.D. 12,140 | | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3672.3 GR | Name of Producing Formation MORROW | Top Oil/Gas Pay 11908 | | Tubing Depth 11848 | | | | |
| Perforations 11908-11927 | | | Depth Casing Shoe | | | | | |
| TUBING, CASING AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | DEPTH SET | | SACKS CEMENT | | | | |
| 17 1/2 | 13 3/8 | 409 | | 500 | | | | |
| 12 1/4 | 9 5/8 | 4150 | | 2300 | | | | |
| 8 3/4 | 5 1/2 | 12250 | | 3250 | | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL 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.)

| | | | |
|--------------------------------|-----------------|-----------------------------------------------|------------|
| Date 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 950 | Length of Test 24 HRS | Bbls. Condensate/MMCF 50 | Gravity of Condensate 55.5 |
| Testing Method (pilot, back pr.) BACK PR | Tubing Pressure (Shut-in) 3660 | Casing Pressure (Shut-in) NA | Choke Size 11/64 |

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
R. Mac DONALD ENG. MGR.
Printed Name
10/11/91
Date
214) 739-1778
Telephone No.

OIL CONSERVATION DIVISION

007 15 1991

Date Approved

By ORIGINAL SIGNED BY TEST SECTION

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.