

Submit 5 Copies
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

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Collins & Ware, Inc.		Well API No. 30-025-31714
Address 303 W. Wall, Suite 2200, Midland, Texas 79701		
Reason(s) for Filing (Check proper box) <input checked="" 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"/>	Request permission to test down sales line
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	after construction of line is complete

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name Quiet Man Federal	Well No. 1	Pool Name, Including Formation Quail Ridge (Morrow)	Kind of Lease State, Federal or Fed	Lease No. NM 40408 out of NM 17238
Location Unit Letter K : 1980 Feet From The South Line and 1980 Feet From The West Line Section 6 Township 20 South Range 34 East , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil Scurlock Permian Corp.	<input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 2500 City West Blvd. Houston Texas 77042				
Name of Authorized Transporter of Casinghead Gas Gas Company of New Mexico	<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 1419, Carlsbad, New Mexico 88221				
If well produces oil or liquids, give location of tanks.	Unit K	Sec. 6	Twp. 20S	Rge. 34E	Is gas actually connected? No	When? Pipeline is under construction

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
		XX	XX					
Date Spudded 11/13/92	Date Compl. Ready to Prod. 1/20/93		Total Depth 13,700		P.B.T.D. 13,603			
Elevations (DF, RKB, RT, GR, etc.) 3604 GR	Name of Producing Formation Morrow		Top Oil/Gas Pay 13,468		Tubing Depth 13,023			
Perforations 13,468' - 13,473' (11 holes)					Depth Casing Shoe 13,699.84'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
26"	20"		447.10		965			
17-1/2	13-3/8		3144.00		2500			
12-1/4	9-5/8		5150.60' DV 3621.54'		Two Stage: 1050 sks total			
8-1/2	5-1/2		13,700.70' DV 11,275.08		Two Stage: 2900 sks total			

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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing 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 Sheryl L. Jonas
Sheryl L. Jonas Agent for Collins & Ware
Printed Name Title
Date 1/22/93 (915) 683-5511 Telephone No.

OIL CONSERVATION DIVISION

Date Approved **JAN 29 1993**

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.