STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
SANTA FE			
FILE			
U.S.O.A.			L
LAND OFFICE			
TRANSPORTER	Ö		
I NAME ON LEA	GAS		
OPERATOR			
PROBATION OFFICE		1	l

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

PROBATION OFFICE AUTHORIZATION TO TRANSPO	ORT OIL AND NATURAL GAS			
I.				
Operator				
Rickey Smith and Mayo Marrs				
Address	•			
P. O. Box 863, Kermit, Texas 79745				
Reason(s) for filing (Check proper box)	Other (Please explain)			
New Well Change in Transporter of:	Ownership change effective			
	October 1, 1987			
X Change in Ownership Casinghead Gas Con				
If change of ownership give name Chayron H. S.A. Though	O. Box 670, Hobbs, NM 88240			
and address of previous owner Chevron U.S.A. Inc., F.	0. Box 070, Hoppey I			
II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Fo.	rmation Kind of Lease No.			
Lease Name	State, Federal or Fee State E-8322			
barmae ricia races but any ricia				
Location T 1000	and 1650 Feet From The Coast			
Unit Letter : 1980 Feet From The Southeine	and 1600 Feet From The Coast			
	35E NMPM, Lea County			
Line of Section // Township 225 Range	DE , NMPM, Lea County			
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL	GAS			
Name of Authorized Transporter of Oil or Condensate	Address (Give address to which approved copy of this form is to be sent)			
Water Injector				
Water Injector Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)				
Name of Administra				
Unit Sec. Twp. Rge.	Is gas actually connected? When			
If well produces oil or liquids,	!			
give location of tanks.	ti- ada number			
If this production is commingled with that from any other lease or pool,	give comminging other fulliper.			
NOTE: Complete Parts IV and V on reverse side if necessary.				
NOIE: Complete Paris IV and V on reverse size of	II			
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION			
	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED, 19			
been complied with and that the information given is true and complete to the best of	Bride M. Jones			
my knowledge and belief.	B1			
	TITLE			
$O \cdot P \cdot P \cdot Q$	This form is to be filed in compliance with RULE 1104.			
rike sails	If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation			
(Signature)	tests taken on the well in accordance with AULE 111.			
Railier	All sections of this form must be filled out completely for allow-			
(Tule)	able on new and recompleted wells.			
10-1-87	Fill out only Sections I. II. III, and VI for changes of owner,			
(Date)	well name or number, or transporter, or other such change of condition.			
	Separate Forms C-104 must be filed for each pool in multiply completed wells.			
	b completed metra-			

IV. COMPLETION DATA		T							
Designate Type of Comple	tion - (X)	Oil Well	Gas Well	New Well	Workover	Deeper	Plug Back	Same Restv.	Diff. Res
Date Spudded	Date Compl	. Heady to P	rod.	Total Depth	· ·		P.B.T.D.	l 	
							1.B.1.D.		
Elevations (DF, RKB, RT, GR, etc.,	Name of Pro	Name of Producing Formation		Top Oll/Gas Pay		Tubing Depth			
Perforations				1					
							Depth Casin	g Shoe	
		TUBING, C	CASING, ANI	D CEMENTIN	G RECORD				
HOLE SIZE	HOLE SIZE CASING & TUBING SIZE		G SIZE	DEPTH SET			SACKS CEMENT		
							<u></u>	CK3 CEMEN	1
				ļ <u>.</u>					
						<u>-</u>			·
V. TEST DATA AND REQUEST OIL WELL	TOR ALLOY	WABLE (T	est must be a	ler recovery o	f total valume	of load off	and must be equ	ual to or exce	nd top allo
Date First New Oil Run To Tanks	Date of Test		70-70-00		thod (Flow.				
Length of Test	Tubing Prose								
	Tubing Press	a W O		Casing Press	we		Choke Size		
Actual Prod. During Test	Oil-Bbis.			Water - Bbis.					
-							Gan-MCF		
SAS WELL							L		
Actual Prod. Test-MCF/D	1		· · · · · · · · · · · · · · · · · · ·	-					
TOTAL PROPERTY OF	Length of Te	st		Bbis. Condun	eqte/MMCF		Gravity of Co.	ndensate	
Testing Method (pitot, back pr.)	Tubing Press	we (Sint-1	a)	Casing Press	ura f What - A.		<u> </u>		
	1				me (spec=11	•)	Choke Size		

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STATE OF NEW MEXICO	
ENERGY AND MINERALS DEPARTMENT	Form C-104
* ** ** ****** ************************	Revised 10-01-78
DISTRIBUTION OU CONSERV	ATION DIVISION Format 06-01-83
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	EW MEXICO 87501
LAND OFFICE	
TRANSPORTER	The second secon
OPERATOR REQUEST F	CR ALLOWABLE
PROBATION OFFICE	AND The state of t
AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL GAS
<u>I</u>	and the second s
Operator	
CHEMBON II C A THO	The second secon
CHEVRON U.S.A. INC.	
Additional Control of the Control of	The state of the s
P. O. Box 670, Hobbs, NM 88240	(1991)
Reason(s) for filing (Check proper box)	Other (Please explain)
New Well Change in Transporter of:	
	Name Change Effective 7-1-85
	Dry Gas
X Change in Ownership Casinghead Gas	Condensate
If change of ownership give name Gulf Oil Corp., P. O.	Roy 670 Hobbs MM 992/0
and address of previous owner Out Off Colp., 1. U.	Box 6/0, Hobbs, NM 88240
T 77777	
II. DESCRIPTION OF WELL AND LEASE	State of the state
Lease Name Well No. Pool Name, Including	Formation Kind of Lease Lease No
Winot Fold Giton Kind /14 (almat	State) Federal or Fee F-82441
Mocation Whit	
1 1981 Varieth	" III'M GAT TONE
Unit Letter : 100 Feet From The Alle	ine and Feet From The Last
	A si demost tr
Line of Section // Township 225 Range	35E, NMPM, LOQ, County
	COUNTY // // COUNTY
III DECICALATION OF THANCHORITH OF OR ARE ALTERNATION	- many and a second
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA	
Name of Authorized Transporter of Cil of Condensate	Aggress (Give address to which approved copy of this form is to be sent)
$I(\mathcal{M})$	
Name of Authorized Transporter of Castaghead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
	1941.144
I I I I I I I I I I I I I I I I I I I	
If well produces oil or liquids, Unit Sec. Twp. Rqs.	Is gas actually connected? When
give location of tanks.	1 Sec. 2017
State and design in commented with that from any other form and	
If this production is commingled with that from any other lease or pool	, give commingling order number:
NOTE: Complete Parts IV and V on reverse side if necessary.	•
TO LE. Complete Land IT with The Conference state If necessary.	
THE CERTIFICATE OF COMPLIANCE	OIL CONCEDVATION DO VICE
VI. CERTIFICATE OF COMPLIANCE	OIL CONSERVATION DIVISION
The state of the state and regularizes of the Oil Conserve State of th	APPROVED AUG 2 3-1985
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of	APPROVED
my knowledge and belief.	11 1/ 2/10 2 - 1 2
my knowledge and benefit	BY DAY

Area Engineer

(Title)

5-31-85

(Dase)

APPROVED AUG 2 3-1985	
BY PARLY AND	
TITLE DISTRICT 1 SUPERVISOR	• •

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

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with AULE 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