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| LAND OFFICE | |
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| | GAS |
| OPERATOR | |
| PRORATION OFFICE | |

NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Supersedes Old C-104 and C-110
Effective 1-1-65

| | |
|--|---|
| Operator MORRIS R. ANTWEIL | |
| Address P. O. Box 2010, Hobbs, NM 88240 | |
| Reason(s) for filing (Check proper box) | 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 Ownership <input type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |

If change of ownership give name and address of previous owner

THIS WELL HAS BEEN PLACED IN THE POOL
DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE. (9-1-82)

II. DESCRIPTION OF WELL AND LEASE

| | | | |
|---|--|--|-----------------|
| Lease Name HUEY | Well No. Pool Name, including Formation 2 West Nadine Blinebry R-7048 | Kind of Lease State, Federal or Fee Fee | Lease No. -- |
| Location Unit Letter F ; 2310 Feet From The North Line and 1980 Feet From The West Line of Section 5 Township 20S Range 38E NMPM Lea County | | | |

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

| | | | |
|--|--|--|-------------|
| Name of 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) The Permian Corporation P. O. Box 1183, Houston, Texas 77001 | | |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) Warren Petroleum Corporation P. O. Box 1589, Tulsa, OK 74102 | | |
| If well produces oil or liquids, give location of tanks. | Unit K | Sec. 5 | Twp. 20S |
| | Ege. 38E | Is gas actually connected? When Yes 28 May 82 | |

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 <input checked="" type="checkbox"/> | Gas Well <input type="checkbox"/> | New Well <input checked="" type="checkbox"/> | Workover <input type="checkbox"/> | Deepen <input type="checkbox"/> | Plug Back <input type="checkbox"/> | Same Res'v. <input type="checkbox"/> | Diff. Res'v. <input type="checkbox"/> |
| Date Spudded 7 April 82 | Date Compl. Ready to Prod. 23 May 82 | | Total Depth 7150 | | P.B.T.D. 6240 | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3582 GR | Name of Producing Formation Blinebry | | Top Oil/Gas Pay 5953½ | | Tubing Depth 6159 | | | |
| Perforations 5953½ - 6040 (19 holes) | | | | | Depth Casing Shoe 7150 | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 12½ | 8-5/8 | | 1500 | | 750 | | | |
| 7-7/8 | 5-1/2 | | 7150 | | 665 | | | |

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 Tanks 23 May 82 | Date of Test 27 May 82 | Producing Method (Flow, pump, gas lift, etc.) Pump | |
| Length of Test 24 hrs | Tubing Pressure --- | Casing Pressure --- | Choke Size --- |
| Actual Prod. During Test | Oil-Bbls. 57 | Water-Bbls. 0 | Gas-MCF 36 |

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. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Don Ineed
(Signature)
Production Clerk
(Title)
June 8, 1982
(Date)

OIL CONSERVATION COMMISSION

APPROVED JUN 9 1982, 19
BY ORIGINAL SIGNED BY
JERRY SEXTON
TITLE DISTRICT ENGINEER

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 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