

## OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

30-025-27772

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.B.	
LAND OFFICE	
TRANSPORTER	OIL
	NATURAL GAS
OPERATOR	
OPERATION OFFICE	
CITY/STATE	

## MERCURY EXPLORATION COMPANY

Address  
1619 PENNSYLVANIA AVE FORT WORTH, TX 76104

Reason(s) for filing (Check proper box)

New Well ☐  
Recompletion ☒  
Change in Ownership ☐

Change in Transporter of:

Oil ☐ Dry Gas ☐  
Casinghead Gas ☐ Condensate ☐

Other (Please explain)

If change of ownership give name  
and address of previous owner

## DESCRIPTION OF WELL AND LEASE

Lease Name  
CONNALLY FEDERAL  
Well No. 1  
Pool Name, including Formation *Red Tank, Cisco Canyon, Las*  
*WEST BOTTLE RIDGE ATOKA*  
Kind of Lease  
State, Federal or Fee FED  
Lease No.  
NM 21805Location  
Unit Letter J : 1980 Feet From The EAST Line and 1980 Feet From The SOUTH

Line of Section 15 Township 22S Range 32E, NMPM, LEA County

## DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐  
PERMIAN SCHUBLOCK PERMIAN CORP EFF 9-1-91  
Address (Give address to which approved copy of this form is to be sent)  
P.O. Box 1183 HOUSTON TX 77251-1183  
Name of Authorized Transporter of Casinghead Gas ☐ or Dry Gas ☒  
TRANSWESTERN Pipeline  
Address (Give address to which approved copy of this form is to be sent)  
P.O. Box 1188 HOUSTON TX 77001  
If well produces oil or liquids,  
give location of tanks.  
Unit Sec. Twp. Rge. Is gas actually connected? When  
J 15 22S 32E YES 1982 3-15-91

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

## COMPLETION DATA

Designate Type of Completion - (X)  
Oil Well Gas Well New Well Workover Deepen Plug Back Same Restv. Diff. Restv.  
X  
Date Spudded 3-5-91 Date Compl. Ready to Prod. 3-15-91 Total Depth 15,119 P.B.T.D. 13,580  
Elevations (DF, RKB, RT, GR, etc.) G.R. 3728 Name of Producing Formation UPPER PERMO PENN Top Oil/Gas Pay 13,290 Tubing Depth 13,200  
Perforations 13,290 - 13,360 OK PK Depth Casing Shoe 15,119

## TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
26"	16"	523'	1410
14 3/4"	10 3/4"	4695'	3350
9 5/8"	7 5/8"	12116'	835
6 1/2"	5"	15119'	555

## 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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
		Casing Pressure	Choke Size
Length of Test	Tubing Pressure	Water-Bbls.	Gas-MCF
Actual Prod. During Test	Oil-Bbls.		

## GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
146	24 HOURS	0.053	52
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-In)	Casing Pressure (Shut-In)	Choke Size
BACK PRESSURE	3200	0	

## 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.

JERRY COX  
(Signature)

AGENT

4-1-91  
(Date)

## OIL CONSERVATION DIVISION

APPROVED APR 22 1991

BY ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

TITLE

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 filled for each pool in multiply recompleted wells.

30 West Bottle Ridge

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