

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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| TRANSPORTER | OIL |
| | GAS |
| OPERATOR | |
| PRODUCTION OFFICE | |

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

Form C-104
Revised 10-01-76
Format 06-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Marshall & Winston, Inc.

Address
310 West Tower, #10 Desta Drive, Midland, Texas 79705

Reason(s) for filing (Check proper box)

| | | |
|--|---|-------------------------------------|
| <input checked="" type="checkbox"/> New Well | Change in Transporter of: | |
| <input type="checkbox"/> 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 |

Other (Please explain)
**CASINGHEAD GAS MUST NOT BE
FLARED AFTER 4-4-88
UNLESS AN EXCEPTION TO R-4070
IS OBTAINED.**

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

| | | | | |
|--|----------------------|--|--|-------------------------|
| Lease Name McNeill "A" | Well No. 1 | Pool Name, including Formation Wantz - Abo R-8667 6/1/88 | Kind of Lease State, Federal or Fee Fee | Lease No. N/A |
| Location Unit Letter L : 3000 Feet From The North Line and 330 Feet From The West Line of Section 6 Township 21S 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"/> Permian Operating Ltd Partnership | Address (Give address to which approved copy of this form is to be sent) Box 838, Hobbs, NM 88240 |
| Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> | Address (Give address to which approved copy of this form is to be sent) |
| If well produces oil or liquids, give location of tanks. | Unit Sec. Twp. Rge. Is gas actually connected? When |
| | L 6 21S 38E No Tentative |

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.

VI. 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 is true and complete to the best of my knowledge and belief.

J M Brandt
(Signature)
Engineer
(Title)
March 8, 1988
(Date)

OIL CONSERVATION DIVISION

APPROVED **MAR 11 1988**, 19
BY **Paul Kautz**
Orig. Signed by
Geologist
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 filed for each pool in multiply completed wells.

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 1-5-88 | Date Compl. Ready to Prod. | | Total Depth 7815' | | | P.B.T.D. 7800' | | | |
| Elevations (DF, RKB, RT, GR, etc.) 3556.7' GR | Name of Producing Formation Abo | | Top Oil/Gas Pay 7110' | | | Tubing Depth 7630' | | | |
| Perforations 7250-7786' | | | | | | Depth Casing Shoe 7815' | | | |
| TUBING, CASING, AND CEMENTING RECORD | | | | | | | | | |
| HOLE SIZE | | CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | | |
| 12-1/4" | | 8-5/8" | | 1602' | | 700 | | | |
| 7-7/8" | | 5-1/2" | | 7815' | | 2495 | | | |
| | | 2-7/8" | | 7630' | | | | | |

V. TEST DATA AND REQUEST FOR ALLOWABLE (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 2-4-88 | | Date of Test 3-7-88 | | Producing Method (Flow, pump, gas lift, etc.) Pumping | |
| Length of Test 24 hrs | | Tubing Pressure - | | Casing Pressure 25# | Choke Size - |
| Actual Prod. During Test | | Oil-Bbls. 192 | | Water-Bbls. 2 | Gas-MCF 225 |

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 | |

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