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TRICT] . Box 1980, Hobbe, NM 88240 DISTRICT II P.O. Drawer DD, Astesia, NM \$5210

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM \$7410

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator							Well V	PI No.			
ARCO OIL AND GAS COM	IPANY						30	-025-303	399		
Address											
BOX 1710, HOBBS, NEW	MEXTOO	8824	0								
Reason(s) for Filing (Check proper box)	TIEATOC	, 0024	<u> </u>		Oth	a (Piease expla	ain)				
New Well		Change in	Transo	orter of	_						
i —	Oil		Dry G		E	FFECTIVE	: 5-1	1,90			
Recompletion		_	Conde				<u> </u>	/			
Change in Operator	Clangue	d Gas	0806								
If change of operator give same and address of previous operator										<u> </u>	
-										-	
IL DESCRIPTION OF WELL	AND LE	ASE						Lene STA	rd .	ase No.	
Lesse Name			Pool P	NATE TAT	ng Formation N YATES	CD		Federal or Fee			
McDONALD WN STATE		31	JAI			51K					
Location							_				
Unit Letter A	_;66	50	Feet F	rom The <u>N</u>	ORTH Lin	and <u>66</u>	<u>0 </u>	et From The	EAST	Line	
Section 14 Townsh	ip 2	22S	Range	361	E , N	MPM,	LEA			County	
III. DESIGNATION OF TRAI	NSPORTE	CR OF O	IL AN	ID NATU	RAL GAS						
Name of Authorized Transporter of Oil		or Conden			Address (Giv	e address to w	hich approved	copy of this fo	rm is to be se	nd)	
					L						
Name of Authorized Transporter of Casin	nghead Gas		or Dry			e address to wi			rm is to be se	nt)	
WARREN PETROLEUM CO.						9, TULSA	, OK 7	4102			
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge	ls gas actuall	y connected?	When		_		
give location of tanks.	i	İ	İ		YES		1 ±	2/26/88	5-1	1,90	
If this production is commingled with that	from any of	her lease or	pool, gi	ive commingi	ing order sum	ber:				/	
IV. COMPLETION DATA				-	•						
		Oil Well		Ges Well	New Well	Workover	Deepes	Plug Back	Same Ros'v	Diff Ret'v	
Designate Type of Completion	i - (X)	1	i		i	i	i			Ì	
Data Spudded		pl. Ready to	Prod.		Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of F	Producing Fo	matic		Top Oil/Ges	Pay		Tubing Depth			
Eleverons (DF, KAD, AI, CR, al.)											
Performigne			· · · · ·		1			Depth Casing	Shoe		
		TIDING	CAS	NG AND	CEMENT	NG RECOR	D	1			
	the second second second second second second second second second second second second second second second s	SING & TL				DEPTH SET		s	ACKS CEM	ENT	
	W	SING a TU	DING	SILE		ULT III ULI		=			
HOLE SIZE											
					<u> </u>	·					
										<u> </u>	
									•		
V TEST DATA AND REQUE	ST FOR A	ALLOW	ABLE					dowl a be d			
V. TEST DATA AND REQUE OIL WELL (Test must be after	recovery of 1	otal volume	ABLE) oil and must	be equal to or	exceed top all	owable for this	depth or be fe		rs.)	
V TEST DATA AND REQUE	ST FOR A recovery of the Date of Te	otal volume	ABLE of load	; oil and must	be equal to or Producing Me	exceed top ello ethod (Flow, p	owable for this ump, gas lift, d	e depth or be fe		rs.)	
V. TEST DATA AND REQUE OIL WELL (Test must be after Date First New Oil Rua To Taak	recovery of 1	otal volume	ABLE of load	; oil and must	Producing M	ethod (Flow, p	owable for this ump, gas lift, d	1c.)		73.)	
V. TEST DATA AND REQUE OIL WELL (Test must be after	recovery of 1	otal volume est	ABLE of load) oil and must	be equal to or Producing Me Casing Press	ethod (Flow, p	owable for this ump, gas lift, d	c depth or be fa tc.) Choke Size		72.)	
V. TEST DATA AND REQUE OIL WELL (Test must be after Date First New Oil Rua To Taak	Date of Te	otal volume est	ABLE of load) oil and must	Producing Me Casing Press	ethod (Flow, pr	owable for this ump, gas lift, e	choke Size		72.)	
V. TEST DATA AND REQUE OIL WELL (Test must be after Date First New Oil Rua To Tank	Date of Te	otal volume est essure	ABLE of load	oil and must	Producing M	ethod (Flow, pr	owable for this ump, gas lift, e	1c.)		rz.)	
V. TEST DATA AND REQUE OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test	recovery of 1 Date of Te Tubing Pr	otal volume est essure	ABLE of load	oil and must	Producing Me Casing Press	ethod (Flow, pr	owable for this ump, gas lift, d	choke Size		rs.)	
V. TEST DATA AND REQUE OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test Actual Prod. During Test	recovery of 1 Date of Te Tubing Pr	otal volume est essure	ABLE of load	oil and must	Producing Me Casing Press	ethod (Flow, pr	owable for this ump, gas lift, e	choke Size		72.)	
V. TEST DATA AND REQUE OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL	recovery of L Date of Te Tubing Pr Oil - Bbls	olal volume est essure	ABLE of load	oil and must	Producing Me Casing Press	ethod (<i>Flow, p</i>	owable for this ump, gas lift, e	choke Size	r full 24 hou	ر د	
V. TEST DATA AND REQUE OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test Actual Prod. During Test	recovery of 1 Date of Te Tubing Pr	olal volume est essure	ABLE of load	oil and must	Producing Me Casing Press Water - Bbls	ethod (<i>Flow, p</i>	owable for this ump, gas lift, e	cc.) Choke Size Gas- MCP	r full 24 hou	ر د	
V. TEST DATA AND REQUE OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D	recovery of L Date of Te Tubing Pr Oil - Bbls	olal volume est essure Test	of load	oil and must	Producing Me Casing Pross Water - Bbls Bbls. Conden	ethod (<i>Flow, p</i> 178 1884:MMCP	owable for thi emp, gas lift, e	cc.) Choke Size Gas- MCP	r full 24 hou	(r	
V. TEST DATA AND REQUE OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL	recovery of L Date of Te Tubing Pr Oil - Bbls	olal volume est essure	of load	i oil and must	Producing Me Casing Press Water - Bbls	ethod (<i>Flow, p</i> 178 1884:MMCP	owable for this emp, gas lift, e	cc.) Choke Size Gas- MCF Gravity of C	r full 24 hou	(s	
V. TEST DATA AND REQUE OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D Testing Method (pilot, back pr.)	recovery of L Date of Te Tubing Pr Oil - Bbls Length of Tubing Pr	cial volume est essure Test essure (Shut	of load	oil and must	Producing Me Casing Pross Water - Bbls Bbls. Conden	ethod (<i>Flow, p</i> 178 1884:MMCP	owable for this emp, gas lift, e	cc.) Choke Size Gas- MCF Gravity of C	r full 24 hou	(
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V. TEST DATA AND REQUE OIL WELL (Test must be after Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D Testing Method (pitot, back pr.) VI. OPERATOR CERTIFIC I hardby certify that the rules and regu	recovery of t Date of Te Tubing Pr Oil - Bbls Length of Tubing Pr CATE OI alations of the	cial volume est essure Test Essure (Shut F COMF s Oil Conser	of load i-in) VLIA vation	oil and must	Producing Me Casing Press Water - Bbls Bbls. Conden Casing Press	ethod (<i>Flow, p</i> 178 1884:MMCP	ump, gas lift, d	cc.) Choke Size Gas-MCF Gravity of C Choke Size ATION [r full 24 hou oudensate		
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V. TEST DATA AND REQUE OIL WELL (Test must be after Date First New Oil Rua To Taak Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D Testing Method (pilot, back pr.) VI. OPERATOR CERTIFIC I hereby certify that the rules and regu Division have been complied with and is true and complete to the best of my Signature Lames D. Conturn. Ac	recovery of t Date of To Tubing Pr Oil - Bbls Length of Tubing Pr CATE OI alations of the t that the info	Cative	of load	NCE ne ervisor 3551	Producing Me Casing Press Water - Bbls Bbls. Conden Casing Press (Date By_	ethod (<i>Flow</i> , pa inte inte inte/MMCF inte (Shut-in) DIL CON Approve OR14	ump, gas lift, d NSERV/ od	Choke Size Gas-MCP Gravity of C Choke Size ATION I MA	oudensate)N 1990	

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.

All sections of this form must be filled out for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
Separate Form C-104 must be filed for each pool in multiply completed wells.

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Energy/Minerals Department

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State of New Mexico - Oil Conservation Division P. O. Box 2088 Santa Fe, New Mexico 87501

Gas Supplement 6105 Number: NY SE-XXX

Date <u>· 1/30/89</u>

NOTICE OF ASSIGNMENT OF ALLOWABLE TO A GAS WELL

The operator of the following well has complied with all the requirements of the Oil Conservati Division and the well is hereby assigned an allowable as shown below.

	Connecti - Fl Pa	on <u>12/26/</u> so Natural G	/88 Da			or Allowable Change	12/26/88
		0il & Gas Co		Pool	1 <u>Jalmat</u> se <u>McDona</u> l	N IIN Chata	
		WU Unit L		Leas	se <u>MCDONAI</u>	a win State	
Dedicate				Sec.	14	Twp. 22	Range <u>36</u>
Dedicate	d Acreay	4.00	Rev	ised Acreage	<u> </u>	Difference	
Acreage			Rev	ised Acreage	Factor	Difference Difference	
Delivera	DILLEY		Rev	ised Deliver	cability	Difference	
AXDFA			Rev	ised A x D H	actor	Difference	
NEW WELL		s w/#11-D,#27 /ed by R-4984				OCD District	No
	<u> </u>	CALC	ULATION O			DWABLE	
Previous	Status A	ljustments					
		PREV. ALLOW.		DEEN DEOD	PEU PPOP	DEMARKS	
April	• • • • • • • • • •	ricov.Albon.	ICLV. ALLOW.	TICLV.FROD.	REV. PROD.	REMARKS	
May				<u> </u>			
June							
July				· · · · · · · · · · · · · · · · · · ·			
August							
September							
October							
November		· · ·					
December		······································					····
January							
February							
March							
April						· · · · · · · · · · · · · · · · · · ·	
Мау							
June							
July		•					
August							
September							
October							
November	L	```					
December							
January							
February							
March			<u> </u>				
TOTALS							
Allowable		ion Differen	the second second second second second second second second second second second second second second second se				····
	Sched	ule O/U Stat					····
Revised		0/U Stat	us			<u> </u>	
				Effective			hedule
				Current Cl	lassificatio	n	To

Note: All gas volumes are in MCF@15.025 psia.

WILLIAM J. LEMAY, Division Director

-

By _____

it 5 Co Appropriate District Office DISTRICT I P.O. Box 1980, Hobbs, NM 88240

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

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

State of New Mexico Energy, Minerals and Natural Resources Department

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

							Well API No.					
ARCO OIL AND GAS CON	OIL AND GAS COMPANY						30-	30-025-30399				
ddress												
BOX 1710, HOBBS, NM	88240				·	- (7)*	.:=1					
leason(s) for Filing (Check proper box)	_	-			a (Piease expla						
iew Well XX	* **	Change in			NOT	ICE OF G	AS CONN	ECTION 1	DATE			
Recompletion	Oil Cariacha		Dry Gas									
Change in Operator	Casinghe		Condens									
change of operator give name nd address of previous operator												
I. DESCRIPTION OF WEL	L AND LE	ASE							·			
Lease Name		Well No. Pool Name, including romation						of Lease Federal or Fed	-	ease No.		
McDONALD WN STATE		31	JAL	MAT TA	NSEL YAT	ES SRQ	State,	Federal or Fe	• A-26	014		
Location				_	. •				F			
Unit LetterA	:	660	_ Feet Fro	on The \underline{N}	orth Line	and660	Fe	et From The	East	Lin		
1/		c					Lea			County		
Section 14 Town	ship 22	.5	Range	36E	<u>, NN</u>	лр м,	<u>a</u>			y		
II. DESIGNATION OF TRA	NSPODT	ER OF C	II. ANT		RAL GAS							
II. DESIGNATION OF TRA Name of Authorized Transporter of Oil		or Conde	asate (Address (Giw	e address to wh	hich approved	copy of this f	form is to be su	ent)		
												
Name of Authorized Transporter of Ca	singhead Gas		or Dry	Gas 🔀		e address to wi			orm is to be s	ent)		
El Paso Natural Gas	<u>Co.</u>					2, El Pa						
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge.	Is gas actually	y connected?	When 1.2					
give location of tanks.		<u> </u>	1		Yes		12	-26-88				
f this production is commingled with the	hat from any o	ther lease of	r pool, giv	e commingl	ing order numb							
IV. COMPLETION DATA		Oil We		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'		
Designate Type of Completion	on - (X)	<u>гот 46</u>	- 1	XX		Ľ_		I		1		
Date Spudded	Date Con	npl. Ready	to Prod.		Total Depth			P.B.T.D.				
6-13-88	7	-8-88			355	0			488			
Elevations (DF, RKB, RT, GR, etc.)	Name of	Name of Producing Formation				3550 Top Oil/Gas Pay			Tubing Depth			
3509.7 GR	JALMA	JALMAT TAN YTS SRQ				0		2896 Depth Casing Shoe				
Perforations								1 -	550			
		TIDDIC	0.00	NG AND	CEMENTI	NG RECOR	2D	<u> </u>				
		TUBING & T			<u>ئا 1 ¥ايتىيەت.</u>	DEPTH SET		1	SACKS CEN	ENT		
HOLE SIZE	C.	ASING & 1 8 5/8				368			250			
<u>12 1/4</u> 7 7/8		$\frac{8.5}{2}$		<u></u>		3550			1451			
1 110		$\frac{3}{2}\frac{1}{3}$				2896						
								1				
V. TEST DATA AND REQU	EST FOR	ALLOW	ABLE				 lauratt= *	io doneh an h	for full 24 L -	urs)		
OIL WELL (Test must be aft	er recovery of	total volum	e of load o	oil and must	De equal to or	exceed top all ethod (Flow, p	ump par life	s wepth of De elc.)	אין אין אין אין אין אין אין אין אין אין			
Date First New Oil Run To Tank	Date of 1	iest			1 IOUUCING M	une (riow, p	···· 7 , 5 • • • • • • • • • • • • • • • • • •	· •				
					Casing Press	ure		Choke Size				
Length of Test	Tubing P	1009010										
Actual Prod. During Test	Oil - BM	Oil - Bbls.				•		Gas- MCF				
LINE LINE FURTHER LOSE												
CAS WELL 7-11-88	<u>t</u>											
GAS WELL 7-11-88 Actual Prod. Test - MCF/D	Length o	A Test			Bbis. Conder	sate/MMCF	······	Gravity of	Condensate			
185	2	24 HRS			0							
Testing Method (pitot, back pr.)		Pressure (Sh	ut-m)		Casing Pressure (Shut-in)			Choke Size				
Back Press		20			300	0		11	2/64			
VI. OPERATOR CERTIF	ICATE C	F COM	PLIAN	NCE					DIVICI	ON		
I harshy certify that the rules and D	egulations of t	he Oil Com	iervation									
Division have been complied with	and that the ini	formation 8	A A DOA TOAN	e			•	JAN	3 1 198	50		
is true and complete to the best of	my knowledge	and delief.			Date	a Approve	ed	<u> </u>				
A	01	2					ARIAN		BY JERRY	SETTON		
Jame &	Cigle u	n		<u> </u>	By_				SUPERVIS			
James D. Cogbu	/		rvice	<u>s Sup</u> r			Ľ	Matrici 1	401 EK 1131			
Printed Name			Title		Title							
1-9-89			<u>2-355</u>									
Date		T	elephone l	NO.	11							

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.