

Submit 5 Copies
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

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

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 Stevens & Tull, Inc.	Well API No. 30-025-30403 Unknown
Address P.O. Box 11005, Midland, Texas 79702	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input type="checkbox"/>	Change in Transporter of: <input type="checkbox"/>
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of operator give name
and address of previous operator

THIS WELL HAS BEEN PLACED IN THE POOL
DESIGNATED BELOW. IF YOU DO NOT CONCUR
NOTIFY THIS OFFICE

II. DESCRIPTION OF WELL AND LEASE

Lease Name D-K	Well No. 2	Pool Name, including Formation Blinebry Oil + gas 12/1/91	Kind of Lease State, Federal or Fee	Lease No. Fee
Location Unit Letter H : 1980 Feet From The North Line and 660 Feet From The East Line Section 25 Township 20-S Range 38-E, 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 SCURLOCK PERMAN 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 <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Texaco Producing, Inc.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 3000, Tulsa, OK 74102
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When ? A 25 20S 38E Yes 4/15/88

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

R-9285 downhole commingle

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 3/9/91	Date Compl. Ready to Prod. 3/17/91	Total Depth 7500	P.B.T.D. 7471					
Elevations (DF, RKB, RT, GR, etc.) 3564' GR	Name of Producing Formation Blinebry	Top Oil/Gas Pay 5990	Tubing Depth 6610					
Perforations 5990-6422 (37 Holes)			Depth Casing Shoe 7500					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					
12 1/4	8 5/8	1668	750					
7 7/8	5 1/2	7500	2350					
----	2 3/8	6610	----					

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 Tank 3/20/91	Date of Test 3/23/91	Producing Method (Flow, pump, gas lift, etc.) Pump	
Length of Test 24 hrs.	Tubing Pressure 25	Casing Pressure 25	Choke Size Open
Actual Prod. During Test	Oil - Bbls. 21	Water - Bbls. 71	Gas - MCF 32

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. OPERATOR 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.

Rodney L. Seale
Signature
Rodney L. Seale Engineer
Printed Name
5/1/91 915/699-1410
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved
By ORIGINAL
Title

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.

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State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 3038

Santa Fe, New Mexico 87504-1088

Form C-116
Revised 1/1/89

GAS - OIL RATIO TEST

Operator		Pool Correlated, D-K Drinkard,		County												
Stevens & Tull, Inc. <td colspan="2">Warren Tubb Gas, Blinbry Oil<td>Lea</td></td>		Warren Tubb Gas, Blinbry Oil <td>Lea</td>		Lea												
Address		P. O. Box 11005, McCloud, Texas 79702														
		WELL NO.	LOCATION	DATE OF TEST	STATUS	CHOKE SIZE	TBG. PRESS.	DAILY ALLOW. ABLE	LENGTH OF TEST HOURS	WATER BRLS.	PROD. DURING TEST	GAS MCF.	GAS - OIL RATIO CU FT/BBL			
LEASE NAME		U	S	T	R											
D-K		2	H	25	20S	38E										
D-K Drinkard							1/29/91	A	-	25	24	4	33	5	6	1200
Warren Tubb							2/18/91	A	-	25	24	26	34	19	27	1420
Blinbry							3/23/91	A	-	25	24	71	33	21	32	1520
Ab.							12/15/90	A	-	25	24	3	53	12	17	1440
Comingle Permit																
R-9285																

Instructions:

During gas-oil ratio test, each well shall be produced at a rate not exceeding the top unit allowable for the pool in which well is located by more than 25 percent. (Operator is encouraged to take advantage of this 25 percent tolerance in order that well can be assigned increased allowances when authorized by the Division.

Gas volumes must be reported in MCF measured at a pressure base of 15.025 psia and a temperature of 60° F. Specific gravity base will be (.60).

Report casing pressure in lieu of tubing pressure for any well producing through casing.

(See Rule 301, Rule 1115 & appropriate pool rules.)

I hereby certify that the above information is true and complete to the best of my knowledge and belief.

Rodney L. Seale
Signature

Rodney L. Seale

Printed name and title

5/1/91

915/599-1410

Date

Telephone No.