

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

## OIL CONSERVATION DIVISION

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

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

### REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Oryx Energy Company		Well API No. 30-025-30604
Address P. O. Box 1861, Midland, Texas 79702		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> 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 Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator		

#### II. DESCRIPTION OF WELL AND LEASE

Lease Name Ojo Chiso Federal	Well No. 1	Pool Name, including Formation Ojo Chiso (Morrow)	Kind of Lease State, Federal or Fee	Lease No. NM 43564
Location				
Unit Letter C	: 990'	Feet From The North	Line and 2310	Feet From The West
Section 26	Township 22-S	Range 34-E	NMPM, Lea	County

#### III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
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)					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When ?
					No	

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	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X	X					
Date Spudded 8-10-89	Date Compl. Ready to Prod. 9-30-90	Total Depth 13,600'	P.B.T.D. 13,530'					
Elevations (DF, RKB, RT, GR, etc.) 3435.9' GR	Name of Producing Formation Morrow	Top Oil/Gas Pay 13,141'	Tubing Depth 2 3/8" x 2 7/8"					
Performances 13,141' - 13,144' Morrow			Depth Casing Shoe 13,115'					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17 1/2"	13 3/8"		1750'		2100 sxs - Surf.			
12 1/4"	9 5/8"		4853'		1650 sxs - Surf.			
8 3/4"	7"		11698'		1450 sxs - TOC 4200' T.S.			
6 1/8"	4 1/2" liner TOP 11,465' - Btm 13,600'				260 sxs			

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

#### GAS WELL

Actual Prod. Test - MCF/D Well SI, not potentialled, 4-12-90	Length of Test	Bbls. Condensate/MMCF Well made 0 BC, 110 MCF	Gravity of Condensate PD, 0 BW, TPO #
Testing Method (pilot, back pr.) Pending evaluation.	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.

Signature  
Maria L. Perez  
Printed Name  
5-10-90  
Date  
915/688-0375  
Title  
Telephone No.

OIL CONSERVATION DIVISION

MAY 16 1990

Date Approved

By

Title

FOR RECORD ONLY

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.

RECEIVED

MAY 15 1990

OCD  
HOBBS OFFICE