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Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico J By, Minerals and Natural Resources Departme

Form C-104 Revised I-1-89 See Instruction

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

DISTRICT II P.O. Drawer DD, Artesia, NM 14210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

•		IO INA	(142)	UNI	Oir	AND NA	UNAL GA	T Wall A	DI No		
P&P PRODUCING,	INC.	e.						3	0-025-	06670	D666
P. O. BOX 3178,	MIDLA	ND, I	EXA	AS 7	970	2-3178					
teason(s) for Filing (Check proper box)							s (Please expla	ia)			
view Mell		Change in	Trans	porter o	(:		C_{i}			_	
	Oit		Dry (-			Z LA	!	1-93	5	
kecompletion \square		d Gas 🔲	•		П		009	S			
hange in Operator XX X					<u> </u>		0 00	1105	нопел	ON TE	XAS 772
change of operator give name (d address of previous operator	GRAHAM	I ROYA	LTY	Υ, L	TD.	<u>, P</u>	.O. BOX	. 4495,	HOUSI	ON, IE	TAB 172
DESCRIPTION OF WELL	AND LEA	Well No.	Bool	Name 1	Includia	g Formation		Kind c	(Lesso _		esse Na
L. G. WARLICK		1	I	PENR	OSE	SKELL	Y GRAYE	BURGSus,	Rederal or Fee		
ocation						27				E	
Unit LetterA		990	. Fed!	From Ti				3·30 F∞	et From The .	E.	Line
19 Section Township		21S	Rang	<u>e</u>	37E	, NA	nm, Le	CA			County
I. DESIGNATION OF TRANS	SPORTE	R OF O	IL A	ND N	ATUF	LAL GAS					
lame of Authorized Transporter of Oil	LXX.	or Conde				Address (Giw	address to wh				
TEXAS NEW MEXI		PE LIN					60028				
lams of Authorized Transporter of Caring	head Gas 💢 or Dry Gas 🗔 TION & PRODUCING I				_				t copy of this form is to be sent) , OK 74102		
	Unit	Sec.	Twp			le gas actually		When			
f well produces oil or liquids, ive location of traks.	A	19	2	_	37		YES	i		2/65	
this production is commingled with that f	rom say oth	er lease or	pool, p	give con	ilgainw	ng order numb	er. <u>PC</u>	209	& D	HC 3	58
V. COMPLETION DATA		Oil Well		Gas W	7-11	New Well	Workover	Doepen	Plus Rack	Same Res'V	Diff Res'v
Designate Type of Completion	- (X)	 Out wen	'	Ous II						<u>i</u>	
Date Spudded	Date Comp	pl. Ready to	o Prod.			Total Depth			P.B.T.D.		
levations (DF, RKB, RT, GR, etc.)	Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth		
rifontions	<u> </u>								Depth Casis	g Shoe	
									<u> </u>		
					AND	CEMENTI	NG RECOR		7	01000000	
HOLE SIZE	CA	SING & T	UBING	3 SIZE			DEPTH SET			SACKS CEM	ENI
									ļ		
									ļ <u> </u>		
	<u> </u>										
. TEST DATA AND REQUES	TEOD	IIIAW	ARI	F					J		
	71 LOK 1	aal valume	of loa	ud oil an	d musi	be equal to or	exceed top all	owable for thi	s depth or be	for full 24 hos	ws.)
IL WELL (Test must be after r Date First New Oil Run To Tank	Date of Te		<u> </u>			Producing M	ethod (Flow, p	ump, gas lift, i	uc.)		
						Casing Press			Choke Size		
ength of Test	Tubing Pressure					Casing riess	116				
Actual Prod. During Test	Oil - Bbls.				Water - Bbla.			Gas- MCF			
	1					<u> </u>			ــــــــــــــــــــــــــــــــــــــ		
GAS WELL						IBbla Conder	use/MMCF		Gravity of	Condensate	
Litual Prod. Test - MCF/D	Length of Test				HULL CONTRACTOR (TOTAL)						
esting Mithod (puot, back pr.)	Tubing Pressure (Shut-m)				Casing Pressure (Shut-in)			Choke Size			
	<u> </u>	 				 			1		
VL OPERATOR CERTIFIC					3	(OIL CO	NSERV	ATION	DIVISIO	NC
I hereby certify that the rules and regul	lations of the	e Oil Coase	ervatio	a			0 , 0 0.				
Division have been complied with and is true and complete to the best of my	that the info	ormation gi and belief.	ven ab	ove		Date	Approve	od 0	CT 26	1993	
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Sany Bore	<u>~</u>					By_			י אין ובטטי	V SEXTON	
SIPPLEARRY R. BOREN MGR., OPER. ACCTG.						1 3,-	By ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR				
Printed Name)	(015)	Tiu		60	Title					
9/23 1993	<u> </u>	(915) Te	Jephon		00		\$4m.				
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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.