STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-104
Revised 10-1-78

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

Scurlock Oil Company
915-683-1092

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator
Pogo Producing Company

Address
P. O. Box 2504, Houston, Texas 77001

Reason(s) for Filing (Check proper box)
New Well [ ]
Recompletion [ ]
Change in Ownership [ ]
Change in Transporter of: Oil [ ] Dry Gas [ ] Casinghead Gas [ ] Condensate [X]

Other (Please explain)
This form being filed on a temporary basis only

If change of ownership give name and address of previous owner

DESCRIPTION OF WELL AND LEASE No. Gramma Ridge Morrow Gas

Lease Name	Well No.	Pool Name, Including Formation	Kind of Lease	Lease No.
State L-922	2	~~Gramma Ridge Morrow~~	State, Federal or Fee State	L-922

Location
Unit Letter J 1980 Feet From The East Line and 1780 Feet From The South
Line of Section 28 Township 21S Range 34E NMPM Lea County

DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil or Condensate X
Scurlock Oil Company
Address (Give address to which approved copy of this form is to be sent)
1216 Vaughn Bldg., Midland, Texas 79701

Name of Authorized Transporter of Casinghead Gas [ ] or Dry Gas X
Llano Inc.
Address (Give address to which approved copy of this form is to be sent)
P. O. Box 1320, Hobbs, New Mexico 88240

If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When
	J	28	21S	34E	Yes	5/24/79

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

COMPLETION DATA

Designate Type of Completion (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
Date Spudded	Date Compl. Ready to Prod.		Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay			Tubing Depth		
Perforations						Depth Casing Shoe		

TUBING, CASING, AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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	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	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

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.

Donna Kelley
Agent
6/1/79

OIL CONSERVATION DIVISION

APPROVED JUN 1 1979, 19

Orig. Signed by
Jerry Sexton
Dist 1, Supv.

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, it 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 for allowable on new and recompleted wells.
Fill only Sections I, II, III, and VI for changes of owner, or other such changes.