TRICTI BOX 1980, Hobbs, NM \$8240

State of New Mexico ergy, Minerals and Natural Resources Departs

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

DISTRICT II P.O. Drawer DD, Artesia, NM \$8210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

	HEQUES	TRANS	SPORT	OIL A	ND NAT	URAL GA	S				
Cross Timbers Operating Company							, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Cross Timbers Open	ating Company						30-	025-1043	<u>b</u>		
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810 Houston Stre	<u>eet, Suit</u>	e 2000). Fort	Wor	th lex	(Please expla	in)				
son(s) for Filing (Check proper box)	Φ.	nee in To	ansporter of:	·		,-					
w Well	Oil		ry Gas								
completion U	Casinghead G	_	ondensate								
pange of operator give name	O Oil and	Gas	Company	. Di	vision.	of Atlan	tic Rich	field Co	mpany		
address of previous operator ARL	O Oil and	10, H	obbs, N	éw Me	ex1co	88240					
DESCRIPTION OF WELL	AND LEASI	£.					Kind of	Lesse		se No.	
use Name	Well No. Pool Name, Including 4 Blinebry Go				· remark			ederal of Foe			
Tite J. Buyu	<u> </u>										
cation F	. 1980	F	eet From Th	. Nor	th Line	1980): Foc	t From The	<u>lest</u>	Line	
Unit Letter										County	
Section 23 Townshi	225	R	tange 37		, N	(PM, Le	ea				
		0E 0II	A NID NA	מודר ב	AL GAS						
L DESIGNATION OF TRAN	SPORTER	Condense	AND NA	A	Address (Giv	eddress to wi	hich approved	copy of this for	m is to be se	4)	
ame of Authorized Transporter of Oil [exas New Mexico Pipe]		ine Co.				Box 1510. Midland. Texas 79701 Address (Give address to which approved copy of this form is to be sent)					
exas New Mexico Pipel ame of Authorized Transporter of Casin	ghead Gas					e address to w	hich approved	copy of this form is to be seen			
Warren Petroleum Compa	ny	n v				30x 1589 y connected?	Tulsa Whea	<u>uklanom</u> ?	Oklahoma 74102		
well produces oil or liquids,	librit IS	23 14	22S	37E 1	Yes	COMPOSED!	6-	28-91			
re location of tents.						per:					
this production is commingled with that	tiom any other	terms on br	, g, 10 cm		• 0.00.0						
V. COMPLETION DATA		Oil Well	Gas W	'ell	New Well	Workover	Deepes	Plug Back	Same Res'V	Diff Res'v	
Designate Type of Completion	- (X) j		i		Tall Back	L	J	P.B.T.D.		<u>. </u>	
late Spudded	Date Compt.	Ready to I	Prod.		Total Depth			1.5.1.5.			
·		t in Fac			Top Oil/Gas Pay			Tubing Depth			
levations (DF, RKB, RT, GR, etc.)	Name of Pro	Name of Producing Formation									
erforations				h				Depth Casing	200¢		
ence and											
	π	BING,	CASING.	AND (CEMENT	NG RECO	<u>KU</u>	T s	ACKS CEM	ENT	
HOLE SIZE	HOLE SIZE CASING & TUBING SIZE				DEPTH SET						
								<u> </u>			
V. TEST DATA AND REQUI	ST FOR A	LLOWA	BLE				erkla čao ch	is death or be t	or full 24 ho	es.)	
V. TEST DATA AND REQUI OIL WELL (Test must be after	recovery of loa	el volume o	of load oil a	nd must	be equal to a	r exceed top a dethod (Flow,)	mono eas lift.	elc.)	/		
Date First New Oil Run To Tank	Date of Tes				Promoting P	seuros (7 rom,)	уш. ү (-				
					Casing Pressure			Choke Size Gas- MCF			
Length of Test	th of Test Tubing Pressure										
Actual Prod. During Test	Oil - Bbls.	Oil - Bbis.				Water - Bbls.			GES- MCF		
VCOR LIGHT NAME 1											
CAC WELL								Consider of	'ondensata		
GAS WELL Actual Prod. Test - MCF/D	Leagth of	Length of Test			Bbls. Condensate/MMCF			Gravity of Condensate			
74	And (nites back to) Tubing Pressure (Shut-in)				Corine Pro	usure (Shut-is)		Choke Size			
Testing Method (pilot, back pr.)	Tubing Pre	saure (Shui	(- <u>in</u>)		Casing Fit	, (a ,					
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VL OPERATOR CERTIF	ICATE OF	COM	PLIANC	E	11	OIL CC)NSER\	/ATION	DIVISI	ON	
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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.







Job separation sheet

Substit 5 Copies Appropriate District Office DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240

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REQUEST FOR ALLOWABLE AND AUTHORIZATION

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		O Inai	131 0.		7		Men v				
RCO OIL AND GAS COMPANY							30	<u>-025-10</u>	436		
	11111										
BOX 1710, HOBBS, NEW	MEXICO	88240									
Lesson(s) for Filing (Check proper box)						s (Please expla		, ,			
iew Well	(Change in T		a o(:	EFF	ECTIVE:	6/28	191			
accompletion	Oil	_	Dry Ges	XX							
Change in Operator	Casinghead	Gas 🗌 🤇	Condens	<u> </u>							
change of operator give name											
d address of previous operator											
DESCRIPTION OF WELL	, AND LEA	SE			. F		Kind o	Lease		ease No.	
ease Name	'	Meli No. 1		BRY GA	ng Formation			Federal or Fee	FEE		
OLLIE J. BOYD		4	PLINE	DK1 G	10						
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		. ,	D	37E	. NN	νPM,	LEA	Α		County	
Section 23 Towns	hi p 22S		Range	<u> </u>							
II. DESIGNATION OF TRA	NCDADTE	OF OI	I. AND	NATU	RAL GAS						
I. DESIGNATION OF TRA lame of Authorized Transporter of Oil	MOLOKIER	or Condens	ate ((X)		e address to wh			M 24 CL E WA	pet)	
			Ľ	نفد	BOX 151	O, MIDLA	ND, TX	79701		 -	
TEXAS NEW MEXICO PIPEI fame of Authorized Transporter of Case	nghead Gas		or Dry G	as XX	Address (Give	e address to wh	ich approved	copy of this fo		und)	
WARREN PETROLEUM COMP					P. O. I	30X 1589			102		
warren PetroLeum Come	Unit	Sec.	Twp	_	is gas actually		When	16/28	101		
we location of tanks.	F	23	22	37		ES		6/20	/ 7/		
this production is commingled with the	at from any other	er lease or p	ool, give	comming	ing order numb	xer					
V. COMPLETION DATA							l Dame	Dive Back	Same Res'v	Diff Res'v	
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Designate Type of Completio	n - (X)				Total Depth		L	P.B.T.D.			
Date Spudded	Date Comp	i. Keady to	PTOG								
		- Audina En			Top Oil/Gas	Pay		Tubing Dep	th		
levations (DF, RKB, RT, GR, etc.) Name of Producing Formation											
					<u> </u>			Depth Casin	g Shoe	-	
Perforations											
	т	LIBING.	CASIN	G AND	CEMENTI	NG RECOR	D				
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
HOLE SIZE								<u> </u>	 		
								 			
								 			
					J			<u> </u>			
. TEST DATA AND REQU	EST FOR A	LLOWA	ABLE			d con all	mable for this	s depth or be	for full 24 hou	es.)	
IL WELL (Test must be afte	r recovery of 10	nal volume	of load oi	il and must	be equal to or	ethod (Flow, pa	emp. eas lift.	uc.)	,,-		
Date First New Oil Run To Tank	Date of Tes				Lioneria W	(s 10 m, pa	- T.O. 13-1	•			
					Casing Press	ine site		Choke Size			
Length of Test	Tubing Pre	Tubing Pressure									
					Water - Bbis			Gas- MCF			
Actual Prod. During Test	Oil - Bbis.							<u></u>			
					1						
GAS WELL					Bbls. Condet	mic/MMCF		Gravity of	Condensate		
Actual Prod. Test - MCF/D	at - MCF/D Length of Test										
Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size					
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VI. OPERATOR CERTIF	ICATE OF	COMP	LIAN	CE	(OIL CON	ISERV	ATION	DIVISIO	אכ	
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James D. Cogburn, A	Administr	ative	Super	<u>rviso</u> r		-	Fit saro R 12)	4,			
Printed Name			Tele 392–16	_	Title						
1991 × 1991			ephone N		11						
		160		~	11						

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