Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

. TO TRANSPORT OIL AND NATURAL GA						Well API No.					
Operator John H. Hen		30-025-12167				7					
Address	l, Suite 52		nd, TX	79701							
Reason(s) for Filing (Check proper box			y Oth	er (Please expl	ain) Lenny	barany y	perme	mines			
New Well	Well Change in Transporter of:						Other (Please explain) Temparary permission to perfect commende with So. Brunen & PA/ale prod.				
Recompletion X	ompletion X Oil Dry Gas					So. Brunean wired/ale prod.					
Change in Operator	Casinghead Gas [X Condensate]		<u> </u>	o dun					
If change of operator give name and address of previous operator											
,	LANDIEACE										
I. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including						Kind of Lease Lease N					
A. M. Drinkard					State,	State, Federal on Fee		e			
Location Unit LetterI	0054	Feet From The	South Lin	e and 658	818 Fe	et From The	East	Line			
Unit Letter	· = 3										
Section 30 Town				мрм,	Lea			County			
III. DESIGNATION OF TRA	NSPORTER OF		URAL GAS	e address to w	hich approved	copy of this form	is to be se	nt)			
Name of Authorized Transporter of Oil		Densate						•			
Navajo Refinin		D C [a NM 8		nt)			
Name of Authorized Transporter of Ca		or Dry Gas	-								
Texaco Produci		m m.	ge. Is gas actual		When	lsa, OK	1410				
If well produces oil or liquids, give location of tanks.	Unit Sec.	Twp. R				, 7/1/89					
If this production is commingled with the	I 30				ending						
IV. COMPLETION DATA	Oil W				Deepen	Plug Back Sa	me Res'v	Diff Res'v			
Designate Type of Completic		en ο πεπ	110.11 110.11			x		i x			
Date Spudded	Date Compl. Read		Total Depth	Total Depth			P.B.T.D.				
	6/27	/89		6955'		60	50'				
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth				
3381' GR Blinebry							5800'				
Perforations 5488, 96, 62, 72, 94, 57	5527, 50, 7 07, 20, 32	. 51. 65 '				Depth Casing S	shoe				
	TUBIN	G, CASING AN	D CEMENT	CEMENTING RECORD							
HOLE SIZE	CASING &	TUBING SIZE		DEPTH SET			SACKS CEMENT				
	NA.	NA				ļ					
	NA										
	2-3/8"			5800'							
V. TEST DATA AND REQU	EST FOR ALLO	WABLE				<u>.l.,</u>					
OIL WELL (Test must be after	er recovery of total volu	me of load oil and m	ust be equal to o	r exceed top all	lowable for thi	s depth or be for	full 24 hou	rs.)			
Date First New Oil Run To Tank Date of Test				Producing Method (Flow, pump, gas lift, etc.)							
7/1/89	7/5	5/89	F	lowing							
Length of Test	Tubing Pressure			Casing Pressure			Choke Size				
24 hrs.	80	‡	33	330#			22/64" Gas- MCF				
Actual Prod. During Test				L.		1					
	11			3		126					
GAS WELL				-		18	4				
Actual Prod. Test - MCF/D	Length of Test		Bbls. Conde	nsate/MMCF		Gravity of Con	OCHSALC				
Testing Method (pitot, back pr.)	Tubing Pressure (S	Tubing Pressure (Shut-in)				Choke Size					
VI. OPERATOR CERTIF					NSFRV	ATION D	IVISIC	N			
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above				JUL 2 0 1989							
Division have been complied with a is true and complete to the best of r	ng that the information ny knowledge and belief	given accove		- A	- d	JUL	Z () E	103			
	_		Date	e Approve	ea						
Komm H. Washock				By ORIGINAL SIGNED BY JERRY SEXTON							
Signature Ronnie H. West Printed Name	brook Vi	ce-Pres.	11		DIS'	TRICT I SUPE	KAIZOK	an was a fire of the			
7/18/89	(915) 684	_	- 1108	·	2						

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
- 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.