STATE OF NEW MEXICO				
ENERGY AND MINERALS DEPARTMENT			Form C-104	
			Revised 10-01-78 Format 06-01-83	•
DISTRIBUTION	OIL CONSERVA	TION DIVISION	Page 1	
BANTAFE	P. O. BOX			
FILE	SANTA FE, NEW			
U.3.G.S.	SANTA PE, NEW			•
LAND OFFICE				
TRANSPORTER CAS	REQUEST FOR	ALLOWABLE		
OPERATOR	AN			
PROBATION OFFICE	AUTHORIZATION TO TRANSPO	ORT OIL AND NATURAL GAS		•
•				
Operator				
Kirby Exploration Compar	iy of lexas			
Address				
P. 0. Box <u>1745</u> Houston	, Texas 77251	Other (Please explain)		
Reason(s) for filing (Check proper box)	_	Uner (Fleuse explaint)		
New Well	Change in Transporter of:	·		
Recompietion		Gas		
Change in Ownership	Casinghead Gas Cor	ndensate		
I. DESCRIPTION OF WELL AND	Well No. Pool No. 11 11 201	EG3 2/1/25 State, F	Heral or Fee Federal NM-	
Sims Federal	1 Wallot Hoo K.S	<u>593 2//28</u> state, r		<del>)29B</del>
	Feel From The North Line	1980 Feet F	rom The East	
Unit Letter B : 000	Feet From theChi			
Line of Section 7 Towns	ship 225 Range	38E , NMPM,	Lea c	ounty
III. DESIGNATION OF TRANSPO	ORTER OF OIL AND NATURAL	GAS	approved copy of this form is to be sen	<u>,                                    </u>
Name of Authorized Transporter of Cli	X or Condensate	Address (othe designed to math		
Phillips Petroleum Comp	bany - Trucks	<u>4001 Penbrook Ode</u>	ssa, Texas 79762 approved copy of this form is to be sen	<u>.</u>
Name of Authorized Transporter of Casin	ighead Gas or Dry Gas	Address (Give address to which		
		Is gas actually connected?	When	
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. A/B 7 22S 38E		· ·	
If this production is commingled with	that from any other lease or pool,	give commingling order number		
NOTE: Complete Parts IV and V				
			VATION DIVISION	

VI. 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 is true and complete to the best of my knowledge and belief.

(Signature)

Supervisor Regulatory (Tiele)

1 - 31 - 86

(Date)

( PPROVED	FEB 1 0 1986	19
ROVED		

### DISTRICT I SUPERVISOR

TITLE \_

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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, this form 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 completely for allowable on new and recompleted wells.

Fill out only Sections I. II. III. and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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COMPLETION DATA

Designate Type of Completi	Oil Weil Gas Wei	I New Well Workover	
	$\operatorname{ion} = (X)$		Deepen Plug Back Same Resty, Ditt. Rest
t Spudded	Date Compl. Ready to Prod.	Total Depth	
			P.B.T.D.
attons (DF, RKB, RT, GR, etc.)	Name of Producing Formation		
		Top Oll/Gas Pay	Tubing Depth
orations			
			Depth Casing Shoe
	TUBING CASING		
HOLE SIZE	CASING & TUBING SIZE	ND CEMENTING RECORD	
	GASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
	1		
	]		······································
L WFU	FOR ALLOWABLE (Test must be	after recovery of total valume of	load oil and must be equal to or exceed top allow
First New Oll Run To Tanks	Date of Test	depth or be for full 24 hours)	toda bit and must be equal to or exceed top allow
	Date of lest	Producing Mathod (Flow, pum	p, sas lift, etc.)
h of Test		-	
	Tubing Pressure	Casing Pressure	Chore Size
Prod. During Test		1	
From During Test	011-ВЫ.	Water - Bbis.	Gas+MCF
			Gde+MCF
		1	
VELL			
Prod. Teat-MCF/D	Length of Test	Bhie Contract	
		Bbls. Condensate/MMCF	Gravity of Condensate
g Method (pitot, back pr.)	Tubing Pressure ( Shut-in )	<u> </u>	
	( emic-re )	Cosing Pressure (Shut-in)	Choke Size

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STATE OF NEW MEXICO NERGY AND MINERALS DEPARTMEN	т				Form C-104 Revised 10-01-78	8 <sup>-</sup>
				N	Format 06-01-83	I
DISTRIBUTION	OILC		ION DIVISIO		Page 1	
SANTA FE		P. O. BOX				
V.B.G.S.	SAN	TA FE, NEW	MEXICO 87501			
		···.				
10:L	·					
TRANSPORTER CAE		REQUEST FOR		•		
OPERATOR I		AND				
PROBATION OFFICE	AUTHORIZATI	ON TO TRANSPO	RT OIL AND NATUR	RAL GAS		•
•						
Operator						
Kirby Exploration Comp	any of Texas	-				
Address						
	n Texas 7	7251				
P. O. Box 1745 Housto Recoon(s) for filing (Check proper box	Jily 10/100	7201	Other (Please	explain)		
	Change in Trans	sporter of:				
New Well			Con I			•
Recompletion					-	
Change in Ownership			densate			<u> </u>
	•					
f change of ownership give name						
and adaress of previous owner	THEASE	brunes	erked las	- R-8593	21.188	
I. DESCRIPTION OF WELL AN	D LEASE	Duran-	Lirkd las	Kind of Lease	2/1/88	Lease No.
I. DESCRIPTION OF WELL AN	Well No. Pobl	Sucress Name, including For	witten			Lease No. NM-
I. DESCRIPTION OF WELL AN	Well No. Pobl	Sucresson Name, including For inkard	Lerkd / al	Kind of Lease	ederal	_
I. DESCRIPTION OF WELL AN	Well No. Pobl	inkard-		Kind of Lease State, Federal or Fee F	ederal C	NM-
I. DESCRIPTION OF WELL AN Lease Name Sims Federal Location B 66	1 Dr	inkard-		Kind of Lease State, Federal or Fee F	ederal	NM-
II. DESCRIPTION OF WELL AN Lease Name Sims Federal Location	1 Dr	inkard-		Kind of Lease State, Federal or Fee F	ederal C	NM- 290298
I. DESCRIPTION OF WELL AN Lease Name Sims Federal Location Unit LetterB:66	0 Feel From The	<u>North</u>		Kind of Lease State, Federal or Fee F	ederal C	NM-
I. DESCRIPTION OF WELL AN Lease Name Sims Federal Location Unit LetterB;66	1 Dr	inkard , North Line	and1980	Kind of Lease State, Federal or Fee F	ederal C	NM- 290298
I. DESCRIPTION OF WELL AN Lease Name Sims Federal Location Unit LetterB:66 Line of Section 7Ta	0 Feet From The	inkard , <u>North</u> Line Range 38	апа <u>1980</u> ВЕ . NMPM	Kind of Lease State, Federal or Fee F Feet From The , Lea	ederal C East	NM- 290298 County
I. DESCRIPTION OF WELL AN Lease Name Sims Federal Location Unit LetterB:66 Line of Section 7Ta III DESIGNATION OF TRANS	0 Feet From The	inkard , <u>North</u> Line Range 38 AND NATURAL	апа <u>1980</u> ВЕ . NMPM	Kind of Lease State, Federal or Fee F Feet From The , Lea	ederal C East	NM- 290298 County
II. DESCRIPTION OF WELL AN Lease Name Sims Federal Location Unit LetterB:66 Line of Section 7 To III. DESIGNATION OF TRANS Name of Authorized Transporter of Co	0 Feet From The ownahip 22S SPORTER OF OIL & or Conden	inkard , <u>North</u> Line Range 38 AND NATURAL	and <u>1980</u> BE , NMPM GAS Atid:055 (Give address	Kind of Lease State, Federal or Fee F Feet From The Lea	ederal C East	NM- 290298 County
I. DESCRIPTION OF WELL AN Lease Name Sims Federal Location Unit LetterB:66 Line of Section 7 III. DESIGNATION OF TRANS Name of Autoprized Transporter of Col Phillips Petroleum CC	0 Feet From The Downship 22S SPORTER OF OIL ( Li  or Conden Dompany - Truck	inkard , <u>North</u> Line Range 38 AND NATURAL scie	and 1980 BE , NMPM GAS Address (Give address	Kind of Lease State, Federal or Fee F Feet From The Lea	ederal C East this form is to 79762	NM- 290298 County
I. DESCRIPTION OF WELL AN Lease Name Sims Federal Location Unit LetterB:66 Line of Section 7 III. DESIGNATION OF TRANS Name of Autoprized Transporter of Col Phillips Petroleum CC	0 Feet From The Downship 22S SPORTER OF OIL ( Li  or Conden Dompany - Truck	inkard , <u>North</u> Line Range 38 AND NATURAL	and 1980 BE , NMPM GAS Address (Give address	Kind of Lease State, Federal or Fee F Feet From The Lea	ederal C East this form is to 79762	NM- 290298 County
II. DESCRIPTION OF WELL AN Lease Name Sims Federal Location Unit LetterB:66 Line of Section 7 To III. DESIGNATION OF TRANS Name of Authorized Transporter of Co	0 Feet From The Downship 22S SPORTER OF OIL ( Li  or Conden Dompany - Truck	inkard , <u>North</u> Line Range 38 AND NATURAL scie	and 1980 BE NMPN GAS Address (Give address 4001 Penbrook Address (Give address	Kind of Lease State, Federal or Fee F Feet From The Lea to which approved copy of Odessa, Texas to which approved copy o	ederal C East this form is to 79762	NM- 290298 County
I. DESCRIPTION OF WELL AN Lease Name Sims Federal Location Unit LetterB :66 Line of Section 7 To III. DESIGNATION OF TRANS Name of Authorized Transporter of Co Phillips Petroleum CC Name of Authorized Transporter of Co	0 Feet From The Downship 22S SPORTER OF OIL ( Li  or Conden Dompany - Truck	inkard , <u>North</u> Line Range 38 AND NATURAL scie	and 1980 BE , NMPM GAS Address (Give address	Kind of Lease State, Federal or Fee F Feet From The Lea to which approved copy of Odessa, Texas to which approved copy o	ederal C East this form is to 79762	NM- 290298 County
I. DESCRIPTION OF WELL AN Lease Name Sims Federal Location Unit LetterB:66 Line of Section 7 III. DESIGNATION OF TRANS Name of Authorized Transporter of Col Phillips Petroleum CC	Poor <u>1</u> <u>0</u> Feet From The <u>Demoship</u> <u>22S</u> <u>PORTER OF OIL</u> <u>as or Conden</u> <u>Dempany</u> - <u>Truck</u>	inkard , North Line Range 38 AND NATURAL sate 3 S Sr Dry Gas 3	and 1980 BE NMPN GAS Address (Give address 4001 Penbrook Address (Give address	Kind of Lease State, Federal or Fee F Feet From The Lea to which approved copy of Odessa, Texas to which approved copy o	ederal C East this form is to 79762	NM- 290298 County

NOTE: Complete Parts IV and V on reverse side if necessary.

## VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been compiled with and that the information given is true and complete to the best of my knowledge and belief.

(Signature)

\_\_\_\_\_Regulatory\_Supervisor\_\_\_\_\_(Tule)

21	1-86	
- 1	- <u>AD</u>	

(Dase)

	OIL CONSERVATION DIVISION	
APPROVE		
BY	DISTRICT I SUPERVISOR	
	DISTRICT	
TITLE	· ·	_

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, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULX 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I. II. III. and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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# IV. COMPLETION DATA

OII Well Designate Type of Completion - (X) Gas Well New Weil Workover Deepen Plug Back Same Res'y. Diff. Res' Date Spudded Date Compi. Ready to Prod. Total Depth P.B.T.D. Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oll/Gas Pay Tubing Depth Perforations Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT

V. TEST DATA AND REQUES	T FOR ALLOWABLE (Test mi	use be after recovery of total volume of loa	d oil and must be equal to or exceed top allow
Date First New Oil Run To Tanks	Date of Teet	this depth or be for full 24 hours) Producing Method (Flow, pump, g	
Length of Test	Tubing Pressure	Casing Pressure	Choze Size
Actual Prod. During Test	O11-Bbis.	Water - Bbls.	Gas+MCF

## GAS WELL

Actual Prod. Test-MCF/D	Length of Test	Date of	
		Bbis. Condensate/MMCF	Gravity of Condensate
Teeting Method (pilot, back pr.)	Tubing Pressure ( Shut-in )	Casing Pressure (Shut-in)	Choke Size



		Revised 10-1-78
OIL CONSERVA	ATION DIVISION	
P. O. BC SANTA FE, NEV	DX 2088 W MEXICO 87501	
	AND	¢
AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL ON	
Company Of Texas		
louston, Texas 77251		
	Oihes (Please explain)	
Change in Hankfolder of	Gos []	
		00001
Petro-Lewis Corpora	ation P.O. Box2250 D	
LEASE	Formation Kind of	Lease NM
1 Drinkard	Rtate. I	Foderal States 029029B
Nonth	1980 Feet	From TheEast
Feel From The NOTUL		Lea Count
mahip 22S Range	38E , NMPM,	
TER OF OUL AND NATURAL (	GAS	in the sent of this form is to be sent)
or Condensate	P 0 Box 1183	Houston, TX 77001
	Address (Give address to which	approved copy of this form is to be sent;
	the second secon	When
A/B 7 225 38E		
		pen Plug Back Same Resty, Dill. Re
	1 New Well Prikover Det	
Date Compl. Ready to Prod.	Total Dopth	P.B.T.D.
	Top Oll/Gas Esy	Tubing Depth
Yame of Producing Formation		Depth Casing Shoe
TUBING, CASING,	AND CEMENTING RECORD	SACKS CEMENT
CASING & TUBING SIZE	DEPTH SET	SACK3 CEMEN
	he often recovery citized volume of	load oil and must be equal to or exceed top
able for the		
FOR ALLOWABLE (Test must able for the	be after recovery of total volume of te depth or be for full 24 hours) Producing kieland (Flow, pum	p, gas lift, etc.)
able for the		
Dete of Test Tubing Presewe	Producing kieled (Flow, pum	p, gas lift, etc.)
Dete of Test	Producing kieland (Flow, pum Casing Press-e	p, gas lift, etc.) Choko Sizo
Dete of Test Tubing Presewe	Producing kieland (Flow, pum Casing Press-e	p, gas lift, etc.) Choke Size Gas+MCF
Dete of Test Tubing Presewe	Producing kieland (Flow, pum Casing Press-e	p, gas lift, etc.) Choko Sizo
able for the Dete of Test Tubing Presewe Cil-Bble.	Producing kieled (Flow, pum Casing Press-e Water-Bbis,	p, gas lift, etc.) Choke Size Gae+MCF Gravity of Condensate
able for the Date of Test Tubing Pressure Cil-Bble.	Uble. Condensate/AddCF	p, gas lift, etc.) Choke Size Gae+MCF Gravity of Condensate Choke Size
able for the Date of Test Tubing Pressure Cil-Bbls. Length of Test Tubing Pressure (Bhut-In)	It depth or be for part of not of   Producing kielized (Flow, pum   Casing Proce   Water-Bbls.   Bbls. Condensate/MMCF   Casing Proce(Shut-in)   OHL CONS	p, gas lift, etc.) Choke Size Gae+MCF Gravity of Condeneate Choke Size SERVATION DIVISION
able for the Cate of Test Tubing Pressure Cil-Bbls. Length of Test Tubing Pressure (Bhut-In) NCE	Bble. Condense: (Shut-in) Cosing Press - (Shut-in) Water-Bble. Cosing Press - (Shut-in) OIL CONS	p, gas lift, etc.) Choke Size Gae+MCF Gravity of Condeneate Choke Size SERVATION DIVISION
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able for the Dete of Test Tubing Presewe Cit-Bble. Length of Test Tubing Presewe (Bhut-in) NCE id regulations of the Oli Conserva	It depth of be for serie flow, pum   Producing kieled (Flow, pum   Cosing Press_e   Water-Bbis.   Uble. Condensele/AddCF   Cosing Press_e (Shut-in)   OHL CONS   APPROVED   DHE.   DIL CONS   APPROVED   DIL CONS   TITLE   DIS   This form is to be   If this is a request	Choke Size Gas-MCF Gas-MCF Gravity of Condensate Choze Size SERVATION DIVISION 2 7 1984 SIGNED SY ALTON TRICT I SUPPRYISON filed in compliance with NULE 1104. for allowable for a newly drilled or de
able for the Dete of Test Tubing Presewe Cit-Bble. Length of Test Tubing Presewe (Bhut-in) NCE id regulations of the Oli Conserva	It depth of DE 10 101 101 1000   Producing Noticed (Flow, pum   Cosing Prove -0   Water - Bbis.   Uble. Condensate/AddCF   Cosing Prove - (Shut - In)   OIL CONS   OIL CONS   Ition   BY   ORIGINAL   TITLE   This form is to be   If this is a request   woll, this form must be	Choke Size Gravity of Condeneate Choke Size Choke Size Choke Size SERVATION DIVISION SIGNED BY SIGNED B
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able for the Date of Test Tubing Presewe Cil-Bble. Length of Test Tubing Presewe (Bhut-In) NCE If regulations of the Oil Conserva- ith and that the information given the best of my knowledge and bel X. Manually ignative)	It depth or be for part of nouring   Producing k:=1203 (Flow, pum   Cosing Press_e   Water-Bbis,   Uble, Condense:=/AtMCF   Cosing Press_e   Cosing Press_e   Dill CONS   OIL CONS   APPROVED   DIL CONS   Ition   BY   ORIGINAL   TITLE   This form usit bo   is a request   well, this form musit bo   tests taken on the well   All sections of this	Choke Size Gas-MCF Gravity of Condeneate Choze Size SERVATION DIVISION SIGNED BY SIGNED BY SIGNED BY SIGNED BY ATON TRICT I SUPERVISOR filed in compliance with AULE 1104. for allowable for a newly drilled or day accompanied by a tabulation of the de- in accordance with AULE 111. form must be filled out completely for
	P. O. 116 SANTA FE, NE REQUEST FC AUTHORIZATION TO TRANS Company Of Texas Ouston, Texas 77251 Charge in Transporter of: Oil Dry Cosingheod Gas Conc Petro-Lewis Corpor Petro-Lewis Corpo	OUISTON, Texas 77251   Ouston, Texas 77251   Change in Transporter of: Other (Please explain,   Oil Dry Gas   Cosinghead Gas Condensate   Petro-Lewis Corporation   Petro-Lewis North   Line and 1980   Feet From The   North Line and   Petro-Lewis North   Line and 1980   Feet From The   North Line and   Petro-Dill Abdress (Gue Eddress to which   P.O. Box 1183   Strippead Gas <

RECEIVED TIEU 1.9 1984

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