

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

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

DISTRICT III  
1000 Rio Brazos Rd, Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator Harvard Petroleum Corporation		Well API No. 30-025-29495
Address P. O. Box 936 Roswell, New Mexico 88202-0936		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Operator <input type="checkbox"/>		<input checked="" type="checkbox"/> Other (Please explain) Re-entry Completion approval to flow casinghead gas from this well must be obtained from the BUREAU OF LAND MANAGEMENT (BLM)
Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator		

II. DESCRIPTION OF WELL AND LEASE

Lease Name James Federal	Well No. #2	Pool Name, Including Formation West Triste Delaware	Kind of Lease Fed. State, Federal or Fee	Lease No. NM-0559539
Location Unit Letter N : 660' Feet From The S Line and 1830' Feet From The W Line Section 29 Township 23S Range 32E, NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Pride Pipeline	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2436 Abilene, Texas 79602					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit 0	Sec. 29	Twp. 23S	Rge. 32E	Is gas actually connected? No	When ? undetermined

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

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well <input type="checkbox"/>	New Well <input type="checkbox"/>	Workover <input type="checkbox"/>	Deepen <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Same Res'v <input type="checkbox"/>	Diff Res'v <input type="checkbox"/>
Date Spudded - Re-entered 5/11/92	Date Compl. Ready to Prod. 6/30/92		Total Depth 4912'		P.B.T.D. 4848'			
Elevations (DF, RKB, RT, GR, etc.) 3659 KB	Name of Producing Formation Delaware		Top Oil/Gas Pay 4810'		Tubing Depth 4039'			
Perforations 4753' - 4848' Open Hole					Depth Casing Shoe 4753'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE 12 7/4"	CASING & TUBING SIZE 8 5/8" 24#		DEPTH SET 1208'		SACKS CEMENT 500 sks "C"			
7 7/8"	7" 23 and 26#		4753'		75 sks Premium +			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (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 Tank 6-30-92	Date of Test 7/17/92	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure 0	Casing Pressure 12#	Choke Size 16/64"
Actual Prod. During Test 100 bbl	Oil - Bbls. 30	Water - Bbls. 70	Gas - MCF 19

GAS WELL

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

VI. OPERATOR 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.

Signature  
H. Lee Harvard  
Printed Name  
August 7, 1992  
Date  
President  
(505) 623-1581  
Telephone No.

OIL CONSERVATION DIVISION

AUG 10 '92

Date Approved

By  
Orig. Signed by  
Paul Kanta  
Geologist

Title

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.