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Appropriate District Office
DISTRICT 1
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

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

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III	Santa re, New Mexico 8/304-2088
1000 Rio Brazos Rd., Aztec, NM 87410	REQUEST FOR ALLOWABLE AND AUTHORIZATION
I.	TO TRANSPORT OIL AND NATURAL GAS

I.	TO TRA	NSPORT O	IL AND NA	TURAL G	AS				
Operator IICA The					ı	Well API No. 30-025-10640			
Oxy USA, Inc	•	<del></del>	<del></del>	·	30	-025-1	.0640	04	
PO Box 50250	, Midland, TX	79710							
Reason(s) for Filing (Check proper bo	r)	<del></del>	O1	ner (Please expl	ain)				
New Well	· —	Transporter of:	1	<b>555</b>					
Recompletion	_	Dry Gas		Effect.	ive Fe	bruary	1, 199	<del>)</del> 3	
Change in Operator	Casinghead Gas	Condensate		<del></del>					
f change of operator give name  nd address of previous operator	<u>Sirqo Operati</u>	ng, Inc.	., PO Bo	ox 3531	, Midl	and, T	X 7970	)2	
I. DESCRIPTION OF WEL	I. AND LEASE					-			
Lease Name		Pool Name, Inclu	ding Formation		Kind	of Lease	7/ 1	Lease No.	
Skelly Penrose "			- 1			e, Federal of Fee Fee			
Location					······································		<del></del>	· , , , , , , , , , , , , , , , , , , ,	
Unit Letter K	<u>:1980</u> 1	Feet From The S	outh Lin	e and 1980	F	eet From The	West	Line	
Section 5 Town	ship 23S	ים לי		1	•				
Section 5 Town	ship 200	Range 37E	, N	мрм, ]	Lea	<del></del>		County	
II. DESIGNATION OF TRA	INSPORTER OF OII	L AND NATI	URAL GAS						
Name of Authorized Transporter of Oil	XX or Condens		Address (Giv	e address to wh	ich approved	copy of this	form is to be s	eni)	
Shell Pipeline Co	orp.	·	PO Box	1910,	Midla	nd TX	79702		
Name of Authorized Transporter of Ca GPM Gas Corp Texaco E&P Inc	singhead Gas 💢 o	or Dry Gas	Address (Giv	Iaza O	ich approved	copy of this	form is 10.be s	<b>fe</b> ok 74	
Texaco E&P Inc.  If well produces oil or liquids,			PO Box	<u>-3000,</u>			102		
ive location of tanks.		Гwp.   Rge 23S   37E		y connected?	When	: <i>1</i> Unknow:	n		
this production is commingled with th				<b>У</b> Г		OTIXITOW.	11		
V. COMPLETION DATA		, &							
Desired Total Control	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion		_1	1	<u></u>		İ	<u>i</u>	<u> </u>	
ate Spudded	Date Compl. Ready to P	rod.	Total Depth			P.B.T.D.			
levations (DF, RKB, RT, GR, etc.)	Name of Producing Form	nation	Top Oil/Gas I	Pay		Tubing Dec	, L		
			•	•		Tubing Dep	Ln .		
erforations						Depth Casin	ig Shoe		
		<del></del>	···	·	· · · · · · · · · · · · · · · · · · ·				
				CEMENTING RECORD					
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT			
						<del> </del>		***	
					<del></del>				
						<u> </u>			
TEST DATA AND REQUI	ST FOR ALLOWAR	LE			<del></del>		<del></del>		
	recovery of total volume of	load oil and must					or full 24 how	<b>'s</b> .)	
ate First New Oil Run To Tank	Date of Test		Producing Me	thod (Flow, pur	np, gas lift, e	(c.)			
ength of Test	Tubing Pressure		Casing Pressu	75		Choke Size			
72641 V. 144	ruoting ricescric		Casing Freedom						
tual Prod. During Test Oil - Bbls.		Water - Bbis.			Gas- MCF				
					·				
AS WELL								_	
tual Prod. Test - MCF/D	Length of Test		Bbls. Condens	ale/MMCF		Gravity of C	ondensate		
	Tubing Pressure (Shut-in)				Choke Size				
sting Method (pitot, back pr.)			Casing Pressure (Shut-in)						
I ODED LEON CONT		· · · · · · · · · · · · · · · · · · ·	-			<u> </u>	<del></del>		
I. OPERATOR CERTIFIC				IL CON	SERV	I MOITA	OINIC	IN	
I hereby certify that the rules and regi Division have been complied with an				00,1				. •	
is true and complete to the best of my	knowledge and belief.		Date	Approved	, F	EB 08	1993		
1241	WHV!		Date	whhioved					
	[		Bv	ORIGINAL S	ianed e/	JERRY SE	NOTX		
Signature P. N. McGee: Att	cornev-in-Fact		-	E <del>laminan</del> Tae	MCT I SU	PERVISOR			
Printed Name	Ti	ile	Title_	5,51					
1-15-93	915/685-1				<del></del>				
Date	Telepho	ADC INO.	11						

## 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.