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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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Plains Petroleum Operating Company		Well API No. 30-025-10948 ✓
Address 415 W. Wall, Suite 1000, Midland, TX 79701		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input checked="" type="checkbox"/>	Oil <input checked="" type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	
If change of operator give name and address of previous operator <u>Cancel Teague Blinbury allow</u>		

II. DESCRIPTION OF WELL AND LEASE

Lease Name E. C. Hill B Federal	Well No. 3	Pool Name, Including Formation Teague (Paddock)	Kind of Lease State, Federal or Fee	Lease No. 064118
Location Unit Letter <u>B</u> : <u>840</u> Feet From The <u>N</u> Line and <u>1655</u> Feet From The <u>E</u> Line Section <u>34</u> Township <u>23S</u> Range <u>37E</u> , 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"/> Texas-New Mexico Pipeline	Address (Give address to which approved copy of this form is to be sent) P. O. Box 60028, San Angelo, TX 76906	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Sid Richardson Gasoline Co.	Address (Give address to which approved copy of this form is to be sent) 201 Main Street, Ft. Worth, TX 76102	
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 35
	Twp. 23S	Rge. 36E
Is gas actually connected? Yes		When? 1972
If this production is commingled with that from any other lease or pool, give commingling order number: <u>PC-823</u>		

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 3-19-93	Date Compl. Ready to Prod. 3-25-93	Total Depth 9371'	P.B.T.D. 5175'					
Elevations (DF, RKB, RT, GR, etc.) 3275' GR	Name of Producing Formation Paddock	Top Oil/Gas Pay 5038'	Tubing Depth					
Perforations 5047' - 5164' (132 Holes)			Depth Casing Shoe					
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT					

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 03-27-93	Date of Test 03-30-93	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 24 hours	Tubing Pressure 45	Casing Pressure 45	Choke Size
Actual Prod. During Test	Oil - Bbls. 58	Water - Bbls. 221	Gas- MCF 122

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.

Mark A. Nieberding
Signature
Mark A. Nieberding Petroleum Engineer
Printed Name
4/20/93
Date
915/683-4434
Title
Telephone No.

OIL CONSERVATION DIVISION

Date Approved APR 23 1993
By Paul Kautz Orig. Signed by
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.
- 3A Teague Blinbury