iubmit 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

DISTRICT II 20. Drawer DD, Anesia, NM 88210

Santa Fe, New Mexico 87504-2088

OIL CONSERVATION DIVISION P.O. Box 2088

| DISTRICT III 000 Rio Brazos Rd., Aztec, NM 87410 | REQUEST FOR | R ALLOW | /ABL | E AND A | UTHORIZ | ATION | | | | |
|--|---------------------------------------|------------------------|-----------------|--|---|-----------------|--|----------------|------------|--|
| Operator | TO TRANSPORT OIL AND NATURAL GAS | | | | | | Well API No. | | | |
| Plains Petroleum Operating Company | | | | | | | | | | |
| Address 415 W. Wall, Suit | e 2110, | Midland | l , 1 | [exas | 79701 | L | | | | |
| Reason(s) for Filing (Check proper box) | | | | Other | (Please explai | in) | | | | |
| New Well | · · · · · · · · · · · · · · · · · · · | ransporter of: | 7 | • | | | | | | |
| it compressed | Oil L I Casinghead Gas C C | Ory Gas | i i | | | | | | | |
| change of operator give name | ch Pet. Inc., | | | 3r St | Sto 11. | -A Fo | rt Worth | Tovo | s 76102 | |
| and address of previous operator | | , ///] | ayı | JI UL., | oce II | <u> </u> | L_HWILLIA | | | |
| . DESCRIPTION OF WELL AND LEASE ease Name Eva E. Blinebry Federal 6 Pool Name, Includin Langlie M | | | | g Formation Kind o State, J | | | Lease Lease No. scheral or Fee LC064118 | | | |
| Location | | | | | | | | | | |
| Unit LetterF | : | Feet From Th | ¢ | Line | and | <u>80</u> Fee | t From The | <u> </u> | Line | |
| Section 35 Township | 23 S | Range | 37 E | , NM | IPM, | Lea | | | County | |
| III. DESIGNATION OF TRANS | PORTER OF OI | L AND NA | TUR | AL GAS | | | -Cebio Com | n in to be see | 10 | |
| Name of Authorized Transporter of Oil x or Condensate Texas-New Mexico Pipeline | | | | | Address (Give address to which approved copy of this form is to be sent) Box 2528, Hobbs, New Mexico | | | | | |
| lexas-New Mexico riperine Interpolation I | | | | Address (Give address to which approved copy of this form is to be sent) | | | | | | |
| El Paso Natural Gas | | | | | | | Texas | 79978 | | |
| If well produces oil or liquids, give location of tanks. | | Twp. | | le gas actually | | When | 1 | <u></u> | | |
| If this production is commingled with that for IV. COMPLETION DATA | rom any other lease or p | | | | · | | Plug Back S | Bas'y | Diff Res'v | |
| Designate Type of Completion - | Oil Well | Gas W | /eli | New Well | Workover | Deepen | Ning Back 12 | attic KCP v | Dill Kerv | |
| Date Spudded | Date Compi. Ready to | Prod. | | Total Depth | <u> </u> | _l | P.B.T.D. | | | |
| | | Ton Olifon | Con Oll/Con Pay | | | T. U Doub | | | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | | | Top Oil/Gas Pay | | | Tubing Depth | | | |
| Perforations | | | | | | | Depth Casing | Shoe | | |
| | TUBING, | CASING | AND | CEMENTI | NG RECO | RD | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | | DEPTH SET | | | SACKS CEMENT | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | 1818 | | <u></u> | | | | | | |
| V. TEST DATA AND REQUES OIL WELL (Test must be after to | ST FOR ALLOW ecovery of total volume | ABLE of load oil as | nd musi | i be equal to o | or exceed top a | llowable for th | is depth or be fo | or full 24 ho | ers.) | |
| Date First New Oil Run To Tank | Date of Test | | | Producing N | Method (Flow, | pump, gas lift, | etc.) | | | |
| Length of Test | Tubing Pressure | | | Casing Pres | sure | | Choke Size | | | |
| Actual Prod. During Test | Oil - Bbls. | | | Water - Bbis. | | | Gas- MCF | | | |
| | | | | <u> </u> | | | | | | |
| GAS WELL Actual Prod. Test - MCF/D | Length of Test | | | Bbls. Condensate/MMCF | | | Gravity of Condensate | | | |
| Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | | | Casing Pressure (Shut-in) | | | Choke Size | | | |
| | | TO LANC | | ار | | | | D. ! ! C ! | ON | |
| VI. OPERATOR CERTIFIC | CATE OF COM | PLIANC ervation | E | | OIL CC | NSERV | /ATION | DIVISI | UN | |
| 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. | | | | Da | Date Approved2 2 5 1991 | | | | | |
| A | Afusta | ; A | |] [| | | | | | |
| Signature Bonnie Husband Office Mgr/Tech | | | | | By ORIGINAL SKANZE BY JERRY SEXTON EISTRICT STORESVISOR Title | | | | | |
| Printed Name 9 -16-91 | (915)6 | Title 83-4434 | | Tit | le | | | | | |
| Date | Ť | elephone No. | | - | | | | | | |

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.

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