Submit 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

OIL CONSERVATION DIVISION

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

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

DISTRICT III 1000 Rio Brizos Rd., Azzec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.	1	OTR	ANS	PORT OIL	AND N	ATURAL GA					
Operator			1	API No.							
PermOK Oil, Inc.							30	0252 5982	. 00S1	 -	
Address 1550 Wynn Joyce Road	l Suita	202	T.R	11 Car	land T	Y 75043					
Reason(s) for Filing (Check proper box)	, barce	202,	- 111	117 641		ther (Please expla	ria)				
New Well		Change is	о Тиам	porter of:	<u> </u>	(1 10-00 cup-	,				
Recompletion	Oil		Dry		Effec	ctive Apri	1 1, 19	993			
Change in Operator											
If change of operator give name United Gas Search, Inc., P.O. Box 151, Tulsa, OK 74101-0151											
and addess to previous operator											
	L DESCRIPTION OF WELL AND LEASE										
Lease Name		Well No.		Name, include				of Lease Federal or Fee	-	esse No. 1051	
Glenn-Ryan		13	130	Juli Lec	onard Queen State, Federal or Fee NM-7951						
н	1980	1	_	N	orth	660			East	• •	
Unit Letter	- :		_ Feet	From The	<u> </u>	ne and	F	eet From The _		Line	
Section 14 Township 26 S Range 37 E NMPM, Lea County											
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS											
Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)											
None-Injection Well Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)											
Name of Authorized Transporter of Casing	Address (Give address to which approved copy of this form is to be sent)										
If well produces oil or liquids, Unit Sec. Twp. Rgs.						is gas actually connected? When ?					
give location of tanks.			1	1		-	i				
If this production is commingled with that I	rom any other	r lease or	pool, s	rive comming!	ing order sun	nber:					
IV. COMPLETION DATA								<u> </u>			
Designate Trans of Completion	~	Oil Well	T.	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	Date Compl. Ready to Prod.				Total Depth			12222		1	
Date Spudded	Date Compt.	. Ready u	o Prod.		год Берш			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation						Top Oil/Gas Pay Tubing Depth					
Living (21, 102), 11, 31, 51, 51, 51, 51, 51, 51, 51, 51, 51, 5											
Perforations						Depth Casing Shoe					
TUBING, CASING AND											
HOLE SIZE	CASING & TUBING SIZE				,	DEPTH SET		SACKS CEMENT			
											
V. TEST DATA AND REQUES	T FOR AL	LOW	ABLE	2				<u></u>			
OIL WELL (Test must be after re					be equal to a	r exceed top allo	wable for thi	s depth or be fo	er full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Test				Producing M	lethod (Flow, pur	np, gas lift, d	tc.)			
								Charles Cies	<u></u>		
Length of Test	Tubing Pressure				Casing Press	rite.		Choke Size			
								Gas- MCF			
ctual Prod. During Test Oil - Bbls.					Water - Bbla	L					
								1			
GAS WELL				·	BCIC 7	and An Land		Genuity AFC	molen sate		
Actual Prod. Test - MCF/D	al Prod. Test - MCF/D Length of Test					Bbis. Condensate/MMCF			Gravity of Condensate		
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in)					Casing Pressure (Shut-in)			Choke Size	Choka Size		
VI ODED A TOD CEDTIES C	TE OF	7(A) 4Th	TIA	NCE							
VI. OPERATOR CERTIFICATE OF COMPLIANCE					OIL CONSERVATION DIVISION						
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					HIN. 7 4000						
is true and complete to the best of my knowledge and belief.					Date ApprovedJUN - 7 1993						
(V) (Vant n					11 · · · ·						
Codney Cathan					By ORIGINAL SIGNED BY SERRY SEXTON						
Rodney Ratheal Vice-President					District Control of the Control of t						
Printed Name Title					Title						
May 28, 1993	214-	-271-6			11110	·					
Date		Tele	phone l	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 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.