

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Cliffs Drilling Company	
Address CitiCorp Center, Suite 300, Houston, Texas 77002	
Reason(s) for filing (Check proper box)	Other (Please explain)
<input checked="" type="checkbox"/> New Well <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Ownership	Change in Transporter of: <input type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Dry Gas <input type="checkbox"/> Condensate

If change of ownership give name  
and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name Starman Federal Unit	Well No. 1	Pool Name, including Formation South Arrenda Roja Strawn Field	Kind of Lease State, Federal or Fee Federal	Lease No. NM 15042
Location Unit Letter _____ : 1980 Feet From The N Line and 1980 Feet From The E Line of Section 28 Township 26 S Range 35 E , NMPM, Lea County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

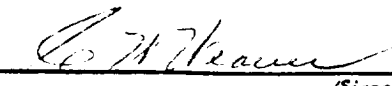
Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Permian Corporation	P0 Box 1183 Houston, Texas 77001
Name of Authorized Transporter of Gaslinehead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Natural Gas Pipeline of America	P0 Box 236, Midland, Texas 79702
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? when
	28 26S 35E yes 7/25/84

If this production is commingled with that from any other lease or pool, give commingling order number: no

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. 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 is true and complete to the best of my knowledge and belief.

  
(Signature) C.W. Weaver  
General Manager Oil and Gas  
(Title)  
8/1/84  
(Date)

OIL CONSERVATION DIVISION

AUG - 9 1984

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY ORIGINAL SIGNED BY JEFFREY L. JORDAN  
DISTRICT I SUPERVISOR  
TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

#### IV. COMPLETION DATA

Designate Type of Completion - (X)		Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v.	Diff. Res'v.
			X	X					
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.				
2/25/82	3/28/83		18535'		15065'				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth				
3140' GR	Strawn		14092'		14000'				
Perforations 15044=15050', 14970'-14976', 14868'-14884', 14848'-14854'						Depth Casing Shoe			
14694'-13700', 14270'-14278', 14230'-14244', 14092-14118'									
<b>TUBING, CASING, AND CEMENTING RECORD</b>									
HOLE SIZE		CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
26"		20"		1505		2500			
17-1/2		13-3/8		5200		4500			
12-1/4		9-5/8		13500		2850			

#### V. TEST DATA AND REQUEST FOR ALLOWABLE (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 Tanks	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
	4/6/83	Flow	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
1 hr	4800		5/64
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
	4	0	50.95

#### GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
	1	4 50.95	56.0
Testing Method (prod. back pr.)	Tubing Pressure (Start-Is)	Casing Pressure (Start-Is)	Choke Size
backpressure	7500	580	5/64"

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