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State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Samedan Oil Corporation		Well API No.
Address 10 Desta Drive, Suite 240 East Midland, Texas 79705		
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	Not shown as being filed
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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Hughes "B-4"	Well No. 2	Pool Name, Including Formation Jalmat	Kind of Lease State, Federal or Fee	Lease No. Federal
Location Unit Letter H : 1345 Feet From The North Line and 660 Feet From The East Line Section 18 Township 22-S 23-R Range 37-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 type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)			
Texaco Producing Inc.	P.O. Box 1137, Eunice, N.M. 88231			
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.
Is gas actually connected?	When?			
YES	1-15-84			

If this production is commingled with that from any other lease or pool, give commingling order number:

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 12-9-83	Date Compl. Ready to Prod. 1-10-84		Total Depth 3750'		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) 3330.6' GL	Name of Producing Formation Yates		Top Oil/Gas Pay 2682'		Tubing Depth 3297'			
Perforations 2682' - 2949'					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/2"	8 5/8"		350'		300 SX			
7 7/8"	5 1/2"		3749'		750 SX			

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	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

GAS WELL

Actual Prod. Test - MCF/D 900	Length of Test 24 hrs.	Bbls. Condensate/MMCF 0	Gravity of Condensate -
Testing Method (pilot, back pr.) Flowing	Tubing Pressure (Shut-in) 1012	Casing Pressure (Shut-in) None	Choke Size 22/64"

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.


Signature
Vertis Diamond
Printed Name
5-11-90
Date
Div. Prod. Clerk
(915) 684-8491
Telephone No.

OIL CONSERVATION DIVISION

MAY 15 1990

Date Approved

By ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

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.

RECEIVED

MAY 14 1990

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HOBBY OFFICE