

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Highland Production Company	Well API No. 30-025-31016
Address 810 N. Dixie Blvd., Suite 202, Odessa, Texas 79761	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input 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	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Conoco "D" Federal	Well No. 4	Pool Name, Including Formation North Mason (Delaware)	Kind of Lease State, Federal or Fee	Lease No. LC-062749-C
Location				
Unit Letter F : 2282 Feet From The North Line and 2287 Feet From The West Line				
Section 18 Township 26S Range 32E , NMPLM, 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"/> Conoco, Inc. - Surface Transportation	Address (Give address to which approved copy of this form is to be sent) 1406 N. West County Road, Hobbs, New Mexico 88240	
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Phillips 66 Natural Gas Company	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, Texas 79762	
If well produces oil or liquids, give location of tanks.	Unit I	Sec. 18
	Twp. 26S	Rge. 32E
	Is gas actually connected? yes	When? 5/17/91

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 <input checked="" type="checkbox"/>	Gas Well	New Well <input checked="" type="checkbox"/>	Workover	Deepen	Plug Back	Same Recv	Diff Recv
Date Spudded 4-22-91	Date Compl. Ready to Prod. 5-17-91		Total Depth 4373		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) 3192 GR	Name of Producing Formation Delaware		Top Oil/Gas Pay 4338		Tubing Depth 4119			
Perforations Open Hole 4338 - 4373					Depth Casing Shoe 4338			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4	8 5/8		1135'		600 HL and Prem+			
7 7/8	5 1/2		4338		935 HL and Prem+			
7 7/8	2 3/8		4119					

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 5-17-91	Date of Test 5-24-91	Producing Method (Flow, pump, gas lift, etc.) Pumping 16" X 2 1/2" X 2" downhole pump	
Length of Test 24 hours	Tubing Pressure 0	Casing Pressure 20#	Choke Size
Actual Prod. During Test	Oil - Bbls. 40	Water - Bbls. 60	Gas - MCF 40

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	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.

Signature
Marvin L. Smith President
Printed Name
May 29, 1991 Date
915/332-0275 Telephone No.

OIL CONSERVATION DIVISION

Date Approved
By **Paul Kautz** 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.