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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
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

Operator Plains Petroleum Operating Company		Well API No. 30-025-31541
Address 415 W. Wall, Suite 1000, Midland, Texas 79701		
Reason(s) for Filing (Check proper box) New Well <input checked="" type="checkbox"/> <input type="checkbox"/> Other (Please explain) <input type="checkbox"/> Recompletion <input type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Authority to sell test oil - 300 BBLS Change in Operator <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>		
If change of operator give name and address of previous operator _____ DESIGNATED BELOW. IF YOU DO NOT CONCUR NOTIFY THIS OFFICE.		

II. DESCRIPTION OF WELL AND LEASE

Lease Name E. C. Hill "B" Federal	Well No. 7	Pool Name, including Formation Teague Blinebry	Kind of Lease State (Federal) or Fee	Lease No. LC 064118
Location Unit Letter J : 2110 Feet From The South Line and 1980 Feet From The East Line Section 34 Township 23S Range 37E, NMPM, 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"/> Scurlock Permian Corp	Address (Give address to which approved copy of this form is to be sent) P. O. Box 3119, Midland, Texas					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 35	Twp. 23	Rge. 37	Is gas actually connected? No	When ?

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 X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 6-26-92	Date Compl. Ready to Prod. 7-24-92		Total Depth 6000'		P.B.T.D. 5955'			
Elevations (DF, RKB, RT, GR, etc.) GR 3268'	Name of Producing Formation Blinebry		Top Oil/Gas Pay 5297'		Tubing Depth 5400'			
Perforations 5767' - 5775' (1 JSPF)		5534' - 5594' (2 JSPF)		5297' - 5444' (1 JSPF)		6000'		
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
18"	14"		39'		10 sx			
12-1/4"	8-5/8"		1216'		535 sx "C"			
7-7/8"	5-1/2"		6000'		1295 sx			
	2-3/8"		5262'					

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.)

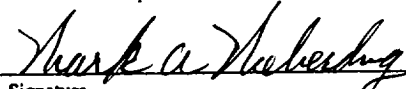
Date First New Oil Run To Tank 7-23-92	Date of Test 7-26-92	Producing Method (Flow, pump, gas lift, etc.) Flow	
Length of Test 24 hr	Tubing Pressure 150	Casing Pressure	Choke Size 32/64
Actual Prod. During Test 225	Oil - Bbls. 225	Water - Bbls. 281	Gas - MCF 389

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	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
Mark A. Nieberding
Printed Name
7-30-92
Date
Petroleum Engineer
Title
915/683-4434
Telephone No.

OIL CONSERVATION DIVISION

AUG 03 '92

Date Approved _____

By ORIGINAL SIGNED BY JERRY NENTON
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.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

RECEIVED

JUL 31 1991

1000 HARRIS ST.