

Submittal 3 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

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I. OPERATOR

Plains Petroleum Operating Company

Well API No.
35-025-317300

415 W. Wall, Suite 1000, Midland, TX 79701

Reason(s) for Filing (Check proper box)

New Well ☒

Recompletion ☐

Change in Operator ☐

Change in Transporter of:
Oil ☐ Dry Gas ☐
Casinghead Gas ☐ Condensate ☐

☐ Other (Please explain)

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name
E. C. Hill 'B' Federal

Well No.
8

Pool Name, Including Formation
Teague Blinebry

Kind of Lease
State, Federal or Fee

Lease No.
LC-064118

Location

Unit Letter 0 : 800' Feet From The S Line and 1980' Feet From The E Line

Section 34 Township 23 Range 37, NMPM, Lea County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐
Texas New Mexico Pipeline

Address (Give address to which approved copy of this form is to be sent)
P. O. Box 5568, Denver, CO 80217

Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐
~~El Paso Natural Gas~~ *Sid Richardson Carbon*

Address (Give address to which approved copy of this form is to be sent)
~~P. O. Box 1492, El Paso, TX 79978~~

If well produces oil or liquids,
give location of tanks.

Unit
D

Sec.
35

Twp.
23S

Rge.
37E

Is gas actually connected?

When ?
10-9-92

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 ☐

Date Spudded
09-14-92

Date Compl. Ready to Prod.
10-10-92

Total Depth
6000'

P.B.T.D.
5715'

Elevations (DF, RKB, RT, GR, etc.)
3253.2 GL

Name of Producing Formation
Blinebry

Top Oil/Gas Pay
5282'

Tubing Depth
5244'

Perforations
5282' - 5708' 5274' - 5703'

Depth Casing Shoe
6000'

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE
12-1/4"
7-7/8"

CASING & TUBING SIZE
8-5/8" csg
5-1/2" csg
2-3/8" tbg

DEPTH SET
1175' KB
6000'
5244'

SACKS CEMENT
610 Prem Plus
350 Prem Plus/1400 HCL

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
10-9-92

Date of Test
10-13-92

Producing Method (Flow, pump, gas lift, etc.)
Flowing

Length of Test
24 hrs

Tubing Pressure
250

Casing Pressure
0

Choke Size
30/64"

Actual Prod. During Test
426

Oil - Bbls.
101

Water - Bbls.
325

Gas- MCF
750

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.

Mark A. Nieberding
Signature
Mark A. Nieberding
Printed Name
10/30/92
Date

Petroleum Engineer
Title
915/683-4434
Telephone No.

OIL CONSERVATION DIVISION

Date Approved
NOV 09 '92

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.

4) Separate Form C-104 must be filed for each pool in multiply completed wells.

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