

OIL CONSERVATION DIVISION

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

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 32203
Address 415 W. Wall, Suite 1000, Midland, TX 79701		
Reason(s) for Filing (Check proper box) <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Other (Please explain)		
Change in Transporter of: Recompletion <input type="checkbox"/> Oil <input 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 E. C. Hill 'B' Federal	Well No. 10	Pool Name, Including Formation Teague Simpson	Kind of Lease State, Federal or Fee	Lease No. LC064118
Location Unit Letter M : 985 Feet From The South Line and 660 Feet From The West Line Section 35 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"/> Texas New Mexico Pipeline	Address (Give address to which approved copy of this form is to be sent) P. O. Box 60028, San Angelo, TX 76906					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Sid Richardson Gasoline Co.	Address (Give address to which approved copy of this form is to be sent) 201 Main St., Ft. Worth, TX 76102					
If well produces oil or liquids, give location of tanks.	Unit A	Sec. 34	Twp. 23S	Rge. 37E	Is gas actually connected? Yes	When? 11-8-93
If this production is commingled with that from any other lease or pool, give commingling order number: PC-823						

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 9-10-93	Date Compl. Ready to Prod. 10-27-93		Total Depth 9943'		P.B.T.D. 9880'			
Elevations (DF, RKB, RT, GR, etc.) GR 3251'	Name of Producing Formation McKee		Top Oil/Gas Pay 9474'		Tubing Depth 6827'			
Perforations 9474' - 9484' and 9359' - 9468' REQUEST LOGS CONFIDENTIAL FOR 12 MONTHS					Depth Casing Shoe 9943'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
17-1/2"	13-3/8"		354'		375 sx 'C'			
11"	8-5/8"		3008'		600 sx 'C'			
7-7/8"	5-1/2"		9943"		2475 sx 'C'			

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 10-28-93	Date of Test 11-21-93	Producing Method (Flow, pump, gas lift, etc.) Pumping 25-175-RHBC 16-20-6 Pump	
Length of Test 24	Tubing Pressure 340	Casing Pressure 60	Choke Size 40/64 csg choke
Actual Prod. During Test	Oil - Bbls. 412	Water - Bbls. 10	Gas - MCF 220

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 Dominic J. Bazile II Area Engineer
Printed Name Dominic J. Bazile II Title
Date 11-24-93 Telephone No. 915/683-4434

OIL CONSERVATION DIVISION

Date Approved DEC 02 1993
By Paul Kauts Orig. Signed by
Title Geologist

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.