Submit 5 Copies to Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

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

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

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

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Samedan Oil Corporation		コウショミスト	Well API No. 30-025-32258
Address			
12600 Northborough, #250, Houston, Tx 77067 Reason(s) for Filing (Check proper box) Other (Please explain)			
New Well	Change in Transporter of:	L	· ·
Recompletion	Oil X Dr		f until Texzs-New Mexico Pipleline is completed. imately 350 bbls
Change in Operator	Casinghead Gas Cond	densate	
If change of operator give name			
and address of previous II. DESCRIPTION OF WELL AND LEASE			
Lease Name		iding Formation	Kind of Lease Lease No.
SHARP		CLINE TUBB #	State, Federal or Fee FEE
Location Unit Letter F : 1980 Feet From The NORTH Line and 1980 Feet From The WEST Line			
Section . JY	i2 Township 23-S	Range 37-E ,NM	IPM, LEA
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS			
Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent.)			
Scurlock Permian Corp 3514 Lovington Hwy, Hobbs, NM 88240			
Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent.) Warren Petroleum PO Box 1909, Eunice, NM 88231			
Warren Petroleum PO Box 1909, Eunice, NM 88231 If well produces oil or liquids, Unit Sec. Twp. Rge. Is gas actually connected? When?			
give location of tanks. F 11 23-s 37-e No			
If this production is commingled with that from any other lease or pool, give commingling order			
IV. COMPLETION DATA Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Same Diff Res'v			
	×	· :	Res'v ×
Date Spudded 11/16/1993	Date Compl. Ready to Prod. 12/16/1993	Total Depth 63.00'	P.B.T.D. 6224'
Elevations (DF, RKB, RT, GR, etc.) 3297 GR	Name of Producing Formation TUBB	Top Oil/Gas Pay	Tubing Depth 6018
Perforations	IUBB	6082	Depth Casing Shoe
6300 6300			
	TUBING, CASING AND		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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.)			
01/17/1994 Length of Test	01/19/1994 Tubing Pressure	Casing Pressure	PUMPING Choke Size
24	Tubing Hessure	Casing Pressure	CHOKE SIZE
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
	130	.20	486
GAS WELL		Inches in the second	
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, 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			ERVATION DIVISION
Division have been complied with and that the information given above is true apd complete to the best of my knowledge and belief.			
		Date Approved JAN 2 € 1994	
Signature Judy Throneberry Division Production Clerk		By ORIGINAL SIGNED BY JERRY SEXTON	
Printed Name Title 01/18/1994 (713) 876-6150		Title DISTRICT I SUPERVISOR	
Date	Telephone No.		
		,	

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