

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS60641
Lanexco - operated
owner is EPSC,
a division of Meridian

Operator Lanexco, Inc.	Well APN No. 30-025-11881
Address P.O. Box 1206 Jal NM 88252	
Reason(s) for Filing (Check proper box) New Well ☐ Change to Transporter of ☐ Other (Please explain) Recompletion ☐ Oil ☐ Dry Gas ☒ Change in Operator ☐ Conspired Gas ☐ Condensate ☐	
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name El Paso Tom Federal	Well No. 7	Pool Name, including Formation Jalmat Gas	Kind of Lease State, Federal or Fee State	Lease No. 054667
Location Unit Letter L : 660 Feet From The W Line and 1980 Feet From The S Line Section 33 Township 25S Range 37E NMDM Lea County				

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)	
Name of Authorized Transporter of Conspired Gas ☐ or Dry Gas ☒	Address (Give address to which approved copy of this form is to be sent)	
Sid Richardson Carbon & Gasoline	201 Main St. Fort Worth, TX 76102	
If well produces oil or liquids, give location of tanks.	Line L Sec. 33 Twp. 25S Rgn. 37E	Is gas actually connected? Yes When? ?
If this production is commingled with that from any other lease or pool, give commingling order number.		

V. COMPLETION DATA **SID RICHARDSON GASOLINE CO. - EPL 3/7/93**

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Different Res'v
Date Spudded	Date Compt. Ready to Prod.		Total Depth		P.B.T.D.			
Stations (DP, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations			Depth Casing Shoe					

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

VI. TEST DATA AND REQUEST FOR ALLOWABLE

II. 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.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF
GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	Gravity of Condensate
Testing Method (pilot, sand pr.)	Tubing Pressure (lb/in.²)	Casing Pressure (lb/in.²)	Choke Size

VII. 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.

Mike Copeland
Signature
Mike Copeland Production Supt.
Printed Name
Telephone No. **505-395-3056**
Date **11-4-91** Telephone No.

OIL CONSERVATION DIVISION

Date Approved **NOV 07 1991**By **Paul Kenty**
Orig. Signed by
GeologistTitle
FOR RECORD ONLY **ADD 30 1993**

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

APR 28 1993

OGD HOBBS CTR