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NEW MEXICO OIL CONSERVATION COMMISSION
REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Form C-104
Superseding Old C-104 and C-111
Effective 1-1-65

| | |
|---|---|
| Operator Doyle Hartman | |
| Address Post Office Box 10426 Midland, Texas 79702 | |
| Reason(s) for filing (Check proper box) | |
| New Well <input type="checkbox"/> | Change In Transporter of <input type="checkbox"/> |
| Recompletion <input type="checkbox"/> | Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> |
| Change In Ownership <input checked="" type="checkbox"/> | Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> |

If change of ownership give name and address of previous owner Sun Exploration & Production Co. P. O. Box 1861 Midland, TX 79702

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| DESCRIPTION OF WELL AND LEASE | |
| Lease Name Gregory "A" | Well No. 6 Pool Name, including Formation Grayburg Langlie Mattix 7 Rivers Queen Kind of Lease State, Federal or Fee Fed Lease No. LC-054667 |
| Location Unit Letter P ; 660 Feet From The South Line and 990 Feet From The East Line of Section 33 Township 25S Range 37E , NMPM, Lea County | |

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| 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 2528 Hobbs, New Mexico 88240 |
| Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas Company | Address (Give address to which approved copy of this form is to be sent) P. O. Box 1492 El Paso, Texas 79978 |
| If well produces oil or liquids, give location of tanks. | Unit Sec. Twp. Rge. Is gas actually connected? When 0 33 25S 37E Yes Sept. 1985 |

If this production is commingled with that from any other lease or pool, give commingling order number: _____

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| 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 | Date Compl. Ready to Prod. Total Depth P.B.T.D. |
| Elevations (DF, 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 |
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| 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 Tanks | 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 |

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|-----------------------------------|--|
| GAS WELL | |
| Actual Prod. Test-MCF/D | Length of Test Bbls. Condensate/MMCF Gravity of Condensate |
| Testing Method (pistol, back pr.) | Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size |

1. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Michelle Hernandez for Larry Armer
(Signature)
Engineer
March 19, 1986
(Date)

OIL CONSERVATION COMMISSION

APPROVED MAR 21 1986, 19

BY ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

TITLE _____

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation logs taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for change of owner, well name or number, or transporter, or other such change of condition.

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