

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Lanexco, Inc.	Well API No. 30-025-26437
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Address P.O. Box 1206 Jal NM 88252

Reason(s) for Filing (Check proper box)		☐ Other (Please explain)	
New Well ☐	Change in Transporter of:	☐ Dry Gas	☐
Recompletion ☐	Oil ☐	Condensate ☒	☐
Change in Operator ☐	Conventional Gas ☒		

If change of operator give name and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name Harrison	Well No. 3	Pool Name, including Foundation Langlie Matrix SROGB	Kind of Lease State, Federal or Foreign	Lease No.
Location				
Unit Letter L	Section 29	Township 24S	Range 37E	County Lea
Foot From The 1650		Line and S		Foot From The 330
		Line and W		

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Navajo Refining Co.	Address (Give address to which approved copy of this form is to be sent) P.O. Drawer 159 Artesia, NM 88210					
Name of Authorized Transporter of Conventional Gas ☒ or Dry Gas ☐ Sid Richardson Carbon & Gasoline Co.	Address (Give address to which approved copy of this form is to be sent) 201 Main St. Fort Worth, TX 76102					
If well produces oil or liquids, give location of tanks.	Unit L	Section 29	Township 24S	Range 37E	Is gas actually transported? Yes	When? ?

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	Duff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, R&B, 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

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 From New Oil Run To Test	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, 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 Mike Copeland		Production Supt.
Printed Name		Title
505-395-3056		
Date 11-4-91	Telephone No.	

OIL CONSERVATION DIVISION

Date Approved	NOV 07 1991
By	Orig. Signed by Paul Kautz
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.

RECEIVED

NOV 06 1991

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