State of New Mexico Form C-104 Submit 5 Copies Appropriate District Office DISTRICT 1 Energy, Minerals and Natural Resources Department Revised 1-1-89 See Instructions 64105 at Bottom of Page P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DIVISION P.O. Box 2088 GAS OPERATIONS P.O. Drawer DD, Anesia, NM 88210 Santa Fe, New Mexico 87504-2088 RECEIVED DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION DEC 3 1991 TO TRANSPORT OIL AND NATURAL GAS Well API No. Operator Doyle Hartman Address __SAG V Midland, Texas 79702 DC1 P. O. Box 10426 Other (Please explain) Reason(s) for Filing (Check proper box) Change in Transporter of: Dry Gas New Well Dry Gas Change in Transporter effective Oil Recompletion November 1, 1991 Casinghead Gas Condensate Change in Operator If change of operator give name and address of previous operator II. DESCRIPTION OF WELL AND LEASE Well No. | Pool Name, Including Formation Lease No. Kind of Lease Lease Name State, Federal or Fee F. M. Burleson "WN" Jalmat (T-Y-7R)3 Location 330 Feet From The North Line and 330 ____ Feet From The West Unit Letter ____D_ , NMPM, Lea Township <u> 25S</u> Range 37E III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) or Condensate Name of Authorized Transporter of Oil Navair Refuring Address (Give address to which approved copy of this form is to be sent) Name of Authorized Transporter of Casinghead Gas or Dry Gas X 201 Main Street, Fort Worth, Texas 76102 Sid Richardson Carbon & Gasoline Company Rge. Is gas actually connected? Twp. When? Unit Sec. If well produces oil or liquids, give location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number. OLINE CO. - Eff. 3/1/93 IV. COMPLETION DATA Gas Well New Well Workover Deepen Plug Back Same Res'v Oil Well Designate Type of Completion - (X) Total Depth Date Compl. Ready to Prod. P.B.T.D. Top Oil/Gas Pay Name of Producing Formation Tubing Depth Elevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUBING, CASING AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE **DEPTH SET** HOLE SIZE V. TEST DATA AND REQUEST FOR ALLOWABLE (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.) Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tank Date of Test Choke Size Casing Pressure Tubing Pressure Length of Test Gas- MCF Water - Bbls. Actual Prod. During Test Oil - Bhis **GAS WELL** Gravity of Condensate Bbls. Condensate/MMCF Actual Prod. Test - MCF/D Length of Test Choke Size Casing Pressure (Shut-in) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION I hereby certify that the rules and regulations of the Oil Conservation NOV 27 1991. Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Date Approved _ Tatint K. Wnelf ROTALL ORIGINAL SALL S. L. Signature Patrick K. Worrell Engineer Title Printed Name FOR RECORD ONLY

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

11/21/91 Date

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance

MAY 11

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

<u>915-684-4</u>011

Telephone No.

- 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.

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Minerals and Natural Resources Department Ener

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

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

OIL CONSERVATION DIVISION P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088

I.	REC					AUTHOR					
Operator	TO TRANSPORT OIL AND NATURAL GA							Well API No.			
Doyle Hartman											
Address											
	Midland,	Texas	79	702	-,						
Reason(s) for Filing (Check proper bo. New Well	x)	Channa :	- T		∐ Ot	her (Please exp	olain)				
Recompletion	Oil	Change	Dry (sporter of:	Change	in Tran	sportor	offootiv			
Change in Operator		ad Gas	_ •	lensate		ember 1,		effectiv	2		
change of operator give name	C. Light	40 043		ALISAKE []	110 VC	mber 1,					
nd address of previous operator	T 43/D 7 F									· -	
I. DESCRIPTION OF WEL Lease Name	ling Formation		Vind	of Lease							
F. M. Burleson "WN"	Williams, Incid					T-Y-7R) State			, '	ease No.	
Location		-1			····································						
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Section 8 Town	ship 25S		Rano	• 37E	N.	ІМРМ,	T				
							Lea			County	
II. DESIGNATION OF TRA	ANSPORTI			ND NATU							
Navajo Refinino	1 1	or Conde	usale		Address (Gi	ve address to w	rhich approved	copy of this for	m is to be se	;nt)	
lame of Authorized Transporter of Ca			or Dr	y Gas X	Address (C:	ve addrana i-	hick a===	1 0000 -6-11- 0	10		
	id Richardson Carbon & Gasoline Company					in Stree	тыст <i>аррго</i> чес .t. Fort	Copy of this for Worth, Te	musuobese exas 7	ens) 16102	
f well produces oil or liquids,	Unit	Sec.	Twp.			ly connected?	When				
ve location of tanks.	<u> </u>	<u></u>	1		<u> </u>		i_				
this production is commingled with the COMPLETION DATA	at from any of	her lease or	pool, g	ive comming	ling order num	iber:					
Designate Type of Completion	on - (X)	Oil Well	 	Gas Well	New Well	Workover	Deepen	Plug Back S	ame Res'v	Diff Res'v	
ate Spudded	Date Com	pl. Ready to	Prod.		Total Depth		······	P.B.T.D.			
evations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth			
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								Depth Casing	Shoe		
		TUBING,	CAS	ING AND	CEMENTI	NG RECOR	D	·!			
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TEST DATA AND REQUI	EST FOR A	LLOW	ABLE		<u> </u>			1			
IL WELL (Test must be after					be equal to or	exceed top all	owable for thi	s depth or be for	full 24 how	rs.)	
ate First New Oil Run To Tank	Date of Te				Producing M	ethod (Flow, pr	ump, gas lift, e	stc.)			
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ength of Test	Tubing Pressure				Casing Pressure			Choke Size			
tual Prod. During Test	Prod. During Test Oil - Bbls.				Water - Bbis.			Gas- MCF			
AS WELL											
mal Prod. Test - MCF/D	Length of	Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate		
sting Method (pitot, back pr.)	Tubing Pre	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size		
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I. OPERATOR CERTIFI	CATE OF	COMP	LIA	NCE							
I hereby certify that the rules and reg	ulations of the	Oil Conserv	vation			DIL CON	1SERV	ATION D	IVISIC	N	
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.											
is true and complete to the best of m	xmowledge al	id belief.			Date	Approve	d				
Tatint K. Wnell						11 -					
Signature					By_	<u> </u>	<u> </u>				
Patrick K. Worrell		Eng.	inee	r	-, _		t				
Printed Name			Title		Title						
		915-6	584-	4011		-					

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