BTATE OF NEW MEXICO

THEREY AND MINERALS DEPARTMENT

OISTAINUTION /

OIL CONSERVATION DIVISION P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-1-78

RECEIVED

| | 7 I. () | ONTER OIL AND | | | DEC 2 9 1981 O. C. D. | | |
|-----|--|---|--|---|-------------------------|------------------|--|
| | I I BANKSONTER | | | | | | |
| i. | AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS | | | RAL GAS | ARTESIA, OFFICE | | |
| | The Eastland Oil Company | | | | | | |
| | P. O. Drawer 3488, Midland, Texas 79702 | | | | | | |
| | Reason(s) for liling (Check proper box) Other (Please explain) Reason -: Inangentation | | | | | | |
| | Change in Transporter of: Change in Transporter of: Change in transporter from Summit Gas Company to Navajo Crude Oil Purchasing Com | | | | | | |
| | Change in Ownership | Colling to | | | | | |
| | and address of previous owner | | | | | | |
| ŢĮ. | DESCRIPTION OF WELL AND | Well No. Pool Name, Including | Formation | Kind of Lease | | Lease No. | |
| | C. R. Lopez "A" 1 Herradura Bend Delaware State, Federal or Fee | | | | | | |
| | Unit Letter M : 66 | Feet From The South L | ine and 990 | Feet From T | rh• West | | |
| | Line of Section 29 T. | waship 22S Range | 28E , NMPA | A, Edd | ly | County | |
| | DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Cit XX or Condensate | | | | | | |
| | | | | | | | |
| | Navajo Crude Oil Purcha Name of Authorized Transporter of Cas None | Address (Give address | P. O. Drawer 175. Artesia, NM 88210 Address (Give address to which approved copy of this form is to be sent) - | | | | |
| | If well produces oil or liquids, give location of tanks. | Unit Sec. Twp. Rge. M 29 22S 28E | is gas actually connect No | led? Whe | - - | | |
| | If this production is commingled wit | th that from any other lease or poo | l, give commingling orde | r number: | | | |
| | Designate Type of Completic | on - (X) Gas Well Gas Well | New Well Workover | Deepen | Plug Back Same Re | siv. Diff. Resiv | |
| | 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 | Top Oil/Gas Pay | | Tubing Depth | |
| | Perforations | | | Depth Casing Shoe | | | |
| | | ND CEMENTING RECOR | CEMENTING RECORD | | | | |
| | HOLE SIZE CASING & TUBING SIZE | | DEPTH SET | | SACKS CEMENT | | |
| | HOLE SIZE | | | | <u> </u> | | |
| | | | | | | | |
| | | 1 | | | | | |
| | | | | ene of land oil | and must be equal to or | exceed top allo | |
| ٠٠. | TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed to able for this depth or be for full 24 hours) | | | | | | |
| | Date First New Oil Run To Tanks Date of Test | | Producing Method (Flo | w, pump, gas lif | (1, e1c.) | 87 | |
| | | | Casing Pressure | | Choke Size | | |
| | Length of Test | Tubing Piessure | Water-Bbis. | | Gos-MCF | 1/2 | |
| | Actual Prod. During Test | Oil-Bble. | | | | | |
| | | | | | | | |
| | Actual Prod. Test-MCF/D | Length of Test | Bbls. Condensate/MMC | F | Gravity of Condensat | • | |
| | Testing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | Coming Pressure (Ehul | (a1- | Chox • Six• | | |
| .1. | CERTIFICATE OF COMPLIANCE | DIL CONSERVATION DIVISION JAN 4 1982 | | | | | |
| | | | APPROVED | JAIY | 4 1304 | , 19 | |
| | I hereby certify that the rules and r Division have been complied with | | a A | resset | | | |
| | above is time and complete to the | . BY | | | | | |
| | | | | | | | |
| | (1) (2)1 | This form is t | o to filed in a | compliance with MUL | .E 1104. | | |
| | George D. Neal | | | If this is a request for allowable for a newly drilled or despens well, this form must be accompanied by a tebulation of the deviation well, this form must be accompanied by a tebulation of the deviation | | | |
| | (Signa | tests taken on the | tests taken on the well in accordance with MULK 111. | | | | |

₩i**c**e President - Production

12-28-81 (Dote)

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 changes of owner well name or number, or transporter, or other such change of condition Separate Forms C-104 must be filed for each pool in multiple.