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Appropriate District Office
DISTRICT J
P.O. Box 1980, Hobbs, NM 88240

## State of New Mexico Energy, Minerals and Natural Resources Department

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

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

1.	REQ				BLE AND L AND NA		SAS				
R-J Enterprises 12								0-031-D0920			
Addiess 313 North Locke		ngton,	New 1	1exico	8740]						
Reason(s) for Filing (Check proper box, New Well  Recompletion  Change in Operator	Oil	Change in	Dry Gar	, []		hange of		or			
If change of operator give name and address of previous operator Gu	rley Oi	1 Compa	ny No	<u>. 11</u>	Rd. 6220	) Kirtl	and, NM	87417			
II. DESCRIPTION OF WELL AND LEASE  Lease Name    Salazar Navajocito 15026   1   Nose Roc					-	4794 ah Ext	1	of Lease Nava 10 ATLINGE No. Federal or Fee NOG8612-1101			
Location Unit Letter M	: 3	30	·····					ect From The	West	Lies	
Section 10 Towns	, NMPM, McKinley County										
III. DESIGNATION OF TRA				) NATU				7			
Name of Authorized Transporter of Oil [X] or Condensate []  Giant Refining Company					Address (Give address to which approved copy of this form is to be sent) P. O. Box 256 Farmington, NM 87499					99	
Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent									eni) 		
If well produces oil or liquids, give location of tanks.					y connected?	nnected?   When ?   no gas					
If this production is commingled with the IV. COMPLETION DATA	t from any od	er lease or p	ool, give	comming	ing order numb	жг		······································	····		
Designate Type of Completion	ı - (X)	Oil Well	G	s Well	New Well	Workover	Deepen	Mug Back	Same Res'v	Diff Rea'v	
Date Syndded		d. Ready to	ind.		Total Depth	-	L	P.B.T.D.			
Lievations (DF, RKB, RI, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth			
Perforations					<u> </u>			Dejth Casir	Dejth Casing Shoe		
TUBING, CASING AND HOLE SIZE CASING & TUBING SIZE						IG RECOR	D	SACKS CEMENT			
v. TEST DATA AND REQUE	ST EAD A		ia ič -								
OIL WELL (Test must be after t				and must	be equal to or t	esceed top allo	wable for thi	s depth or be	for full 24 hou	(1)	
Date First New Oil Run To Tank					Producing Met		mp, <b>g</b> as lýi, i				
Length of Test				Casing Pressure			O C	OT 2 3 19	93		
Actual Prod. During Test	Oil · Bbls.			Water - Bbla.			OIL	OIF COM THE			
GAS WELL	1		******	,					DIST. 3	}	
Actual Prod. Test - MCT/D					Bbls. Condensate/MMCI			Gravity of C	Gravity of Condensate		
esting Method (pitot, back pr.)	Tubing Pressure (Shut in)				Casing Pressure (Shut in)			Chuke 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 any knowledge and helief					OIL CONSERVATION DIVISION  Date Approved MAY 1 0 1994  By 3 A Same						
John Cunningham Co-Owner  Printed Name October 26, 1993					Title SUPERVISOR DISTRICT						
Date		Teleph	one No.								

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.