Appropriate District Offices
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

DISTRICT II P.O. Drawer DD, Astesia, NM \$8210

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Bio Respot Rd. Aziec. NM 87410

TOO IO DISTRE WITH LINES AND	REQ					AUTHOR					
Coperator Coperator		IO IRA	ANSF	OHI OIL	- AND NA	TURAL G	Mail WO	API No.			
MAX D. WEBB					-					<u> </u>	
Address										7: ·	
Box 190, Farming (Check proper both	<u>ngton. N</u>	M 874	199		Ou	vet (Please exp	lain)				
Kesson(s) for Filing (Caeca proper out	<i>1</i>)	Change is	Transp	porter of:	٠-	10 00 mg	,				
Recompletion	Oil		Dry C								
Change in Operator	Casingh	ead Gas/	Cond	ensate							
change of operator give name ad address of previous operator	lexander	Energy	. Cor	cp., 701	Cedar	Lake Bly	d, Okla	homa City	/ 	73114-7	
L DESCRIPTION OF WEL	.L. AND LI	EASE		·							
Asses Name		Well No.	Well No. Pool Name, Includi			ing Formation Kind			of Lease Federal Lease No. Federal or Fee No.		
Federal 6		22	<u> </u>	Lybrook	Gallup		State	, reusial of rec	NM28	3745	
ocatios	10	ca			Manakh	. 0			West		
Unit Letter	:10	60	_ Feet I	From The	North Lie	e and	265F	eet From The	Nest	Line	
Section 6 Town	mahip 2	3N	Range	. 7W	, N	MPM,	Rio Ar	riba		County	
II. DESIGNATION OF TR		ER OF O		ND NATU	RAL GAS	e address to w	hich approve	d copy of this for	n is to be se	at)	
iams of Authorized Transporter of Oi	1 XX	OF CORDER	There					, NM 8749			
Giant Refining Jame of Authorized Transporter of Co	singhead Gas		or Dr	y Gas 🔲	Address (Gi	e address to w	hich approve	d copy of this for	n is to be se		
Bannon Energy								Suite 240	<u>, Houst</u>	on, TX	
well produces oil or liquids, we location of tanks.	Unit	Sec.	Twp	Rge.		y connected? yes	Whe	n ?			
this production is commingled with t		there leaves are		ive comminal							
this production is comminged with t /. COMPLETION DATA	rat mon and o	Met leine of	poor, g	Ac comming	mg order man						
Designate Type of Completi	on - (X)	Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back S	ıme Res'v	Diff Res'v	
ate Spudded		npl. Ready to	Prod.		Total Depth			P.B.T.D.			
			<u>.</u>		Top Oil/Gas	Day		Dir Die			
evations (DF, RKB, RT, GR, etc.)	Name of	Producing Fo	ormatio	0	Top Our Cas	ray		Tubing Depth	•		
rigrations	l						- 	Depth Casing	Shoe		
		TUBING, CASING AND								-, -	
HOLE SIZE		CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT		
, <u></u>											
TEST DATA AND REQU	EST FOR	ALLOW	ABLE				lamakla fan th	is doneh av ha far	full 24 hosa	er)	
	Date of T		of load	oil and must	Producing M	ethod (Flow, p	owabie jor in ump. zas lift.	is depth or be for etc.)	<u> </u>	•./	
ate First New Oil Rua To Tank	Date of 1	, CAL									
ength of Test	Tubing P	ressure			Casing Press	ine		P) se		17 12	
								CHIMCE			
ctual Prod. During Test	Oil - Bbl	E.			Water - Bbis	•		JU	L2 3 19	391	
 					l				CON	DIV	
AS WELL	II anash a	Total			Bbls. Conder	sate/MMCF		Gravity of Con		_	
ctual Prod. Test - MCF/D	Length of	. 1991						W. W.	DIST	<u>3</u>	
sting Method (pitot, back pr.)	Tubing P	Tubing Pressure (Shut-in)			Casing Press	ure (Shut-in)	-	Choke Size			
the state of the s							:			·	
L OPERATOR CERTIF	ICATE O	F COMP	LIA	NCE		N CON	Jeedy	ATION D	MISIC	ANI	
I hereby certify that the rules and re	gulations of th	e Oil Conser	vation		'	JIL CON	10に11	Y LION D	. v 1010	71 ▼	
Division have been complied with and that the information given above in true and complete to the best of my knowledge and belief.			<i>/</i> e	Date ApprovedJUL 2 3 1991							
In this aim chather in the cent of the	-,				Date	Approve	ıa	704-01			
* Suche	150				D.		1	1 d	/		
Signature			Λ		By_						
<u>Katharine Jer</u>			Agen Title		Title		SUPE	RVISOR DIS	TRICT	#3	
Printed Name July 22, 199)1			7-4711	Inte						
Date		Tele	phone	No.	11						

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.