Separate Forms C-104 must be filed for each pool in multiperomoteted wells.

MICHAELS DEPARTMENT es come errinee

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE

THE STATES	AND AND ANTHORIZATION TO TRANSPORT OIL AND NATURAL GAS				
PPURETION OFFICE					
: etro-Lewis Camporat	ion				
Box 16200 Lubbook, T	lexas 79-90	Other (Please explai	n)		
Freson(s) for liling (Check proper box)	Change in Transporter of:			\	
hew Well hecompletion	Oil Dry Got				
Change In Ownership	Casinghead Sas Conden	•5.•			
E change of ownership give name and address of previous owner					
DESCRIPTION OF HELL AND I	LEASE. Well No. Fool Name, Including Fo	C1 .*********	of Lease	NM-23045	
Federal 6	43 Lybrook-Gal	lup & & &	Federal of Kee		
		250 Fee	From TheEast_		
Unit Letter I : 2	2040Feet From The South Lin	<u></u>		County	
Line of Section 6 Tow	waship 23% Range 7	, NMPM, F	Rio Arriba		
	TER OF OIL AND NATURAL GA	Address (Give address to whi	at approved copy of this fo	orm is to be sent)	
None of Authorized Transporter of Cit	K C	Lang 1 16+ h C+	Phoenix, Arl	z. 0)020	
Giant Refining Compa	any				
Name of Authorized Transporter of Cas		Box 2009 One Mesa Square Amarillo, Tx.			
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Yes	6/82		
	ith that from any other lease or pool,	give commingling order num	ber:		
If this production is commingled wi	Oil Well Gas Well	New Well Workover De	repen Plug Back So	ame Res'v. Diff. Res's	
Designate Type of Completion			P.B.T.D.		
Date Spudded	Date Compl. Ready to Prod.	Tota: Depth			
OF BLD ST CR atc.	Name of Producing Formation	Top OIL/Gas Pcy	Tubing Depth		
Elevations (DF, RAB, RT, GR, etc.)		<u></u>	Depth Casing	Shoe	
Perforations					
		O CEMENTING RECORD	SAC	KS CEMENT	
HOLE SIZE	CASING & TUBING SIZE	DETTION			
The state of the s	COR ALLOWARLE Mest must be	after recovery of social volume of	of load oil and must be equ	al to or exceed top atte	
V. TEST DATA AND REQUEST F	able for this	Producing Method (Flow, pu	imp, gas lift, etc.)		
Date First New Oil Run To Tanks	Date of Test		Choke Size		
Length of Test	Tubing Pressure	Casing Pressure		-	
	and Obligation	Water-Bble.	S & B BOWNES		
Actual Prod. During Test	Oil-Bbis.		<u> </u> FEB 3 = 1985	<i>y</i>	
			,		
GAS WELL	Length of Test	Bbls. Condenscie/MMCF	I CON . DIA. C	ondenedie .	
Actual Frod. Test-MCF/D		Cosing Pressus (Shut-ix	DIST. Bhoke Size		
Teeting Method (pitot, back pr.)	Tubing Presewe (Shut-in)	1			
an coupill	NCF		SERVATION DIVIS	ION -	
1. CERTIFICATE OF COMPLIA		APPROVED	CASTIES GO	CLSON . 19	
I hereby certify that the rules and	d regulations of the Oil Conservation ith and that the information given the best of my knowledge and belia	Origino	al Signed by CHARLES GI		
Division have been complete with above is true and complete to t	ith and that the information gives the best of my knowledge and belia	N. 10 Y			
1		TITLE	TITLE with nute 1104.		
		If this is a request for allowable for application of the deviation			
Wanna / Jundsay		- Il ment this form must t	If this is a request for allowable for a newly drilled or designation of the deviation will, this form must be accompanied by a tabulation of the deviation will, this form must be accordance with MULK 111. All sections of this form must be filled out completely for allowable to the accordance will be accompletely for allowable to the accordance will be accompletely for allowable to the accordance will be accompletely for allowable to the accordance will be accordance.		
Produciton/Revenue	e Supervisor	All sections of the	ale form must be the	•	
	(Tale)	able on new and reco	ctions I. II. III, and V	A for changes of owns	
1-28.8	(Date)	well name or number,	ctions I. II. III. and V or transporter, or other a C-104 must be filed f	or each pool in multis	
(Data)		Behaiste Poline	well name or number, or transporter, or other owner such pool in multiput beparate Forms C-104 must be filed for each pool in multiput be filed for each pool in multiput because the file of the file		