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Appropriate District Office
DISTRICT I
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 Instruction

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

RIO BIEZOS Rd., Aziec, NA	A 8/410	REQUE	ST FOR	LIA F	OWAB	LE ANI	AUTHORIZ IATURAL GA	LA NU NS	NIN.					
			UTRAN	15PU	MI UIL	AND N	MI OI ME CA	<u>~</u> w	al AP					
ace Oil Compan	v. Inc.					=				30 043	2030)6		
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3 Washington S	E, Albu	querqu	e, New	Mexi	LOO 87	108	Other (Piease expia	oin)						
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expletion			Gas 🔲 (Conden	sale []									
ge in Operator L	 :													
ddress of previous operand	×		CE.			_								
DESCRIPTION OF	WELL A	NU LEA	Well No.	Pool Na	me, includ	ing Format	ion	1.	Kind of	Lease Inc	lian	Lease 1		
se Name hace Apache 54		ļ	3	West	Lindr	ith Ga	llup-Dakot	a •					<u>. </u>	
atios					_		. 10	ÞΕΛ	E	From The	_Fa:	st	Line	
Unit Letter)	:99	0	Feet Fr	om Th: _S	outh	Line and18	350				1		
34		23	N	Range	3	3W	, NMPM,		Sar	ndoval			County	
Section	Township													
DESIGNATION C	F TRANS	PORTE	R OF OI	L AN	D NATU	RAL G	AS (Give address to w	vhich app	roved	copy of this fe	am is to	be sent)		
me of Anthonized Transporter of Oil						P. 0	P. O. Box 256, Farmingt				8749	9		
iant Refining	ter of Chainel	head Gas		or Dry	Ces [Address	(Give address to w	which app	proved .	copy of this fi	77H is 10	be sest)		
l Paso Natural	Gas Cor	mpany). Box 1492		Pas		9978			
rell produces oil or liquids		Unit		1 wp. 23N	• -	L le gas a	ves	i	~		/13/7	8		
location of tanks.		0	34	2.314 2001. 20		gling order								
. COMPLETION I	od win min i ATA	De my G								Plug Back	Isaan I	es b	iff Res'v	
			Oil Well		Ges Well	New	Well Workover	De	epez	Link mer) 			
Designate Type of C	ompletion -	- (X)	Dents to	Pend		Total I	epth .			P.B.T.D.				
te Spudded	Date Comp. stanty as I acc													
evations (DF, RKB, RT, GR, etc.) Name of Producing Formation						Top Oi	Top Oil/Gas Pay			Tubing Depth				
EVENOUS (DT , MAD , MA)	<u> </u>								Depth Casing Shoe					
eforations										<u> </u>			· 	
TUBING.					ING AN	D CEMI	NTING RECO	ORD		SACKS CEMENT				
HOLE SIZE		CASING & TUBING SIZE					DEPTH SET			SAUND CEMENT				
TROLE U.S.										 				
														
		+												
. TEST DATA AN	D REQUE	ST FOR	ALLOY	ABL	E		al to or exceed top cing Method (Flow	ellowa hi	le for th	Park B	or fell	AM.	FIT	
IL WELL (Test	mest be after	recovery 9	IOLE HARM	e of loa	d oil and m	Produ	cing Method (Flow	, рытр. (gas lift,	4) 15		- 14 - 14 - 14 - 14 - 14 - 14 - 14 - 14	1	
tale First New Oil Run To	Tank	Date of	i ez							Choke Su			S.m.	
ength of Test		Tubing	Pressure			Casin	g Pressure			CBOKE	₹	. 1 (C) (C)	; N 3	
Augu to						Water	r - Bbls			Cas- MC	f .		। इंटिंग	
Actual Prod. During Test		Oil - Bt	ak.											
GAS WELL		Length of Test				Bbls	Bbls Condensate/MMCF			Gravity o	Gravity of Condensate			
Actual Prod. Test - MCF/	•		-				Daniel China	<u> </u>		Choke Si	ze ·	-		
esting Method (pitot, back	k pr.)	Tubing	Pressure (S	hut-m)		Casi	ng Pressure (Shut-in	u)						
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VI. OPERATOR	CERTIFI	CATE	OF CON	APLL	ANCE		OIL C	ONS	ER	OITAN	4 DI/	VISIC	N	
I hereby certify that the	e rules and reg	culations of	information	given al	<i>,</i> L					2001				
Division have been con is true and complete to	the best of m	y knowled	ge and belief	f. ^			Date Appro	oved		MAY	24	1989		
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				<u>w</u>	4_	-	Ву		A			•		
Signature Frank A. We	elker, V	Vice P	resider	nt Pr	roducti	– ion	•		SUF	ERVISI	ON DI	STRIC	T#3	
Frank A. We	elker, V	Vice P	resider 5/266-5	nt Pr	rodusti	– ion	By		SUF	PERVISI	DN DI	STRIC	T#3	

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

Date

- 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.