Submit 5 Copies
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 lioitom of Page

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, Artesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Openio		10 IN	ZIVO!	FORT OIL	AND IN	OI IAL OF	Walk	Pi No.			
Openior PetroCorp Incorp	orated										
Addicas											
16800 Greenspoint	Park Di	rive :	300	North	Housto		77060-2	391			
Reason(s) for Filing (Check proper box)			-		XX Oth	s (Please expla	in)				
New Well		Change in			Соп	pany Nam	e Change	e Only -	-		
Recompletion [_]	Oil		Dry	_		m PetroC				porated	
Change in Operator	Cusingher	d Gas	Cond	densate							
change of operator give name											
I. DESCRIPTION OF WELL	AND LE	ASE	•								
ease Name Well No. Pool Name, Includi					ng Formation	•		Kind of Lease		Leuse Na	
					PC (Gas	3)	Stand	State Federal or Fee		JIC358	
Location					1						
Unit LenerG		20_	_ Fed	From The	Line	. m 15	20 Fo	et From The .	ヒ	Line	
•		0.57		251			` d 1				
Section 5 Townsh	ip 2.	2N	Ranj	ge 2W	, Ni	ирм,	Sandoval			County	
	ICDADTE	ነው ረንድ ረን	.TT A	NID NIA TITL	242 140						
II. DESIGNATION OF TRANSPORER OF Authorized Transporter of Oil	42LOKIE	or Conde		TAD RATO	RAL GAS Address (Give address to which approved copy of this form is to be sent)						
Plante of Medionized Transports of City		0. 000					**	,,,,,			
Name of Authorized Transporter of Casinghead Gas XX or Dry Gas					Address (Give address to which approved copy of this form is to be sent)						
El Paso Natural Gas	, m.				P O Box 1492 E1			_	9978		
If well produces oil or liquids,	Unit	Sec.	Twp	. Rge.	ls gas actuali	y connected?	When	7			
ive location of tanks.		<u> </u>	<u> </u>		<u>L</u>			 			
this production is commingled with that	from any of	her lease of	pool,	give commings	ing order num	DET	·				
V. COMPLETION DATA					,		·,				
Designate Time of Completion	/ Y1	Oil Wel	ŭ	Gas Well X	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion		ipl. Ready i	n Brown		Total Depth	L	1	P.B.T.D.	<u> </u>		
Date Spudded	Date COTT	ys. Acatoy I	O FRUC	-				1			
levauons (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth			
the state of the s								<u> </u>			
Ferri are bons								Depth Casii	ng Shoe		
TUBING, CASING AND											
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
	<u> </u>			······································		W122					
											
	-				 						
V. TEST DATA AND REQUE	909 72	ALIOU	ARI	.Ē	1						
OIL WELL Test must be after	recovery of t	iotal volum	ساده. ما ای	ad oil and must	be equal to a	exceed top all	lowable for th	is depth or be	for full 24 ho	urs.)	
Date First New Oil Run To Tank	Daic of T		_,			iethod (Flow, p					
_								· PATTER TO			
Length of Tex	Tubing Pr	ತಾರ್ಚ	St. 44		Casing Press	nie	, c	Choke Size	· [6] 非 划		
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Actual Prod. During Test	Oil - Bbis.				Waldr- Iblia			Gas, MCF 1 6 1932			
				· · · · · · · · · · · · · · · · · · ·		1		Ang. 1.2	energy and the		
GAS WELL								(J.) C	daji Ne in	٧٠.	
Actual Prod. Test - MCF/D	Length of	lest		100	Bols. Coude	nsue/MMCF	•	Gravity of	Condensate		
		ووروا الماد فالميت بيت	در	- 3 1 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0	10			1/20-20-20			
Testing Method (pital, back pr.)	I Ubing Pi	rezsure (Sh	m-m)	الله والدرا	TC3Stng/Fres	eure (Sinus-in)		Oloke Siz	Ε .		
					-						
VL OPERATOR CERTIFIC							NCEDI	/ΔΤΙΩΝ	DIVICI	ON	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					OIL CONSERVATION DIVISION						
Division have been complied with and is true and complete to the best of my			ven at	oove				EC 1619	992		
	- runmisonEc	OCINCI,			Dat	e Approv	ed	<u></u>			
11/1001/	>					•	なんご	s el			
Signature	 				∭ By_		Bill!	-	<u> </u>		
C. Carol Cook		Produc		n Analys			SUPERVI	SOR DIS	TRICT #	্ৰ	
Printed Name 11 -12 -92	717	3–875–2	Tiu Soo		Title	9					
11-12-92 Date	/13			ne No.				_			
		11	- CINK	···· 14U,	13						

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.