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DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

## 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 Brazos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

					L AND NA			A PAR A Vo		<del></del>		
Operator The Gary-Williams	Williams Company					Well API No. 30 043 20753						
370 17th Street, S	uite 530	00, De	enver,	, co 8	0203							
Reason(s) for Filing (Check proper box)			_		XX Ou	et (Please exp	lain)					
New Well	Oil	Change is	, ·		Operato	r Name a	ınd Addre	ess Chan	ige			
hange in Operator	Casinghee	4 Gao	Dry Ga	_		1-26	Chang	e cula	· 1			
<del>, ,</del>		=										
d address of previous operator			I PIC	xucer,	inc., i	15 Inver	ness Dr	E.,Engl	.ewood, (	00 80112-		
DESCRIPTION OF WELL	AND LEA	ASE Well No.	Pool N	lame Inchyl	ing Formation	<del></del>	Vind	-41	<del></del>			
eja Pelon 6 <i> 537 </i>		13	W:	ildcat	Chae	سمار		of Lease Federal or Pe	MM-24	450 No.		
ocation	700				<b>a</b>	-						
Unit LetterM	_ : <u>790</u>		_ Feet Pr	room The	South Lin	e and8	70 Fe	et From The	West	Line		
Section 6 Townshi	i <b>p</b> 2	<u>ln</u>	Range	4W	, N	MPM,	Sandova	1		County		
. DESIGNATION OF TRAN	SPORTE	R OF O	IL AN	D NATU	RAL GAS							
ame of Authorized Transporter of Oil	XX	or Conde	nante		Address (Giv		hich approved					
ame of Authorized Transporter of Casin		<u>mon'</u>			370_17	th Stroc	t. Suite	5300.	Denver	CO 8 <del>0203</del>		
V/A	gnead Cas	L	or Dry	Gas	Address (Giv	e address to w	hich approved	copy of this f	orm is to be s	ent)		
well produces oil or liquids, re location of tanks.	Unit	Sec.	Twp.	Rge.	is gas actuali N/A	y connected?	When	?		<del></del>		
this production is commingled with that	from any other	er lease or	pool, giv	re comming	L	per:						
. COMPLETION DATA												
Designate Type of Completion	- (X)	Oil Well	(	Gas Weli	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
te Spudded	Date Comp	i. Ready to	o Prod.	·	Total Depth	<u> </u>	<u> </u>	P.B.T.D.	L	.1		
evations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth				
								rading Deput				
rforations					•			Depth Casin	g Shoe			
										· · · · · · · · · · · · · · · · · · ·		
	77	DIMIC	CACD	ALC: A NID	CELENTE	IC DECOD	<b>D</b>			SACKS CEMENT		
HOLE SIZE	1				CEMENTI				SACKS CEM	ENT		
HOLE SIZE	1	UBING, ING & TU			CEMENTI	NG RECOR			SACKS CEM	ENT		
HOLE SIZE	1				CEMENTI			S	SACKS CEM	ENT		
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	CAS	SING & TU	JBING S		CEMENTI			\$	SACKS CEMI	ENT		
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TEST DATA AND REQUES L WELL (Test must be after n	CAS T FOR A	LLOW	JBING S	SIZE	be equal to or	DEPTH SET		depth or be j				
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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.

