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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 Instructions at Bottom of Page

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

RICT III Rio Brazos Rd., Aztec, NM 87410	REQU	TOAR	NODE	א וווי דבו	ITAN GNA	UHAL GAS	,				
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rest	ton, Nev	w Mexico	874	401							
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completion X	Casinghea	d Gas 🔲	Conde	nate							
mge in Operation	со	eng Inc	; <u>.                                    </u>	3300 Nort	th Butler	Farming	ton, New	Mexico 87	7401		
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Unit LetterD	_ :850	)	Feet F	rom The NO	Line	and				County	
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I. DESIGNATION OF TRAIN ame of Authorized Transporter of Oil	OI ON II	or Conde	nsale		Address (Giv	e address to wh	ich approved (	ישון נייחו ביי קיקיה		•	
ame of Authorized Transporter of Ott	لـــا							and this form	m is to be se	nt)	
ame of Authorized Transporter of Casin	ighead Gas	ead Gas or Dry Gas X			Address (Give address to which approved P. O. Box 990 Farm			ington, NM 87499			
El Paso Natural Gas Comp	oany	arry			le one actuali	is gas actually connected? Who			<del></del>		
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to an in of tenire		1	ــــــــــــــــــــــــــــــــــــــ		ing order mum	ber:					
this production is commingled with that	from any o	ther lease of	r pool, g	has community	TITE OLOGE TOTAL						
V. COMPLETION DATA				Gas Well	New Well		Deepen	Plug Back	Same Res'v	Diff Res'v	
	. ~\	Oil We	и !	Cat Men	I New West	i	i i	1			
Designate Type of Completion	1 - ( <i>A)</i>	1									
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Date Spudded	Date Co				Total Depth Top Oil/Gas			P.B.T.D.  Tubing Depth			
	Date Co	mpl. Ready						Tubing Depth			
Date Spudded	Date Co										
Date Spudded	Date Co							Tubing Depth			
Date Spudded  Elevations (DF, RKB, RT, GR, etc.)	Date Co	Producing	Formati	Off.	Top Oil/Gas	; Pay	<u> </u>	Tubing Depth Depth Casing	Shoe		
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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
- 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.