Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O.Box 1980, Hobbs, NM 88240

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

DISTRICT III 1000 RIO Brazos Rd, Aztec, NM 87410

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088 Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I	 	U TRANSPI			7101175		_		
Operator			7	Well API No.					
MW Petroleum C	Corporation								
Address Address									
1700 LINCOLN, SUITE 1900, DENVER, CO 80203-4519									
Reason(s) for Filing (Check proper box) Other (Please explain) Other (Please explain)									
JANI 01994									
Recompletion Oil		OIL CON DIV			,				
Change in Operator Casi									
f change of operator give name and address of previous operator						<u> </u>	ist. 3		
II. DESCRIPTION OF WELL AND LE	EASE		_						
Lease Name Well No. Pool Name, Incl				luding Formation Kind of Lease			Lease No. Agreement		
Jacarilla Apache Tribal 124 3 Lindrith Gal				Dakota, West	State, Fe	deral or Fee	Fee 124 TR#221		
Location	10	50		1	1050	Park Park Tha	E	Line	
Unit LetterJ	_: :18;	50 Feet From	The	Line and _	1030	Feet From The		LINE	
Section 13 Township	25N	Range 4	4 W , 1	IMPM, R	o Arriba			County	
			1 4 4 1	Wit Mi	<u>o ruinou</u>				
III. DESIGNATION OF TRANSPORT			Add	ress (Give addre	ss to which a	pproved copy of thi	s form to be sent	<u>)</u>	
Giant Refining	P.	P. O. Box 256, Farmington, NM 87499							
Name of Authorized Transporter of	☐ Add	Address (Give address to which approved copy of this form to be sent)							
Gas Company of New Mexico				P. O. Box 1899, Bloomfield, NM 87413					
If well produces oil or liquids,	Unit	Sec. Twp. Rg	ge. Is ga	as actually conn	ected?	When ?			
give location of tanks.					<u>.</u>	I			
If this production is commingled w	ith that from any o	ther lease or pool,	give com	mingling order	number:		.		
IV. COMPLETION DATA	Oil	Weil Gas Weil	New	Well Worko	ver Deepe	n Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	- (X)	l 1	1		I 	<u> </u>		<u> </u>	
Date Spudded	Date Compl. Read	y to Prod.	Tota	l Depth		P.B.T.D.			
Elevations(DF,RKB,RT,GR, etc.) Name of Producing Formation				Top Oil/Gas Pay		Tubing De	Tubing Depth		
						Donth Casi	Depth Casing Shoe		
Perforations				Depui Casi	ing snoe				
		TIRING CAS	ING AND	CEMENTING R	ECORD.	k			
HOLE SIZE	CASING & TUBING SIZE			DEPT			SACKS CEMENT		
HOLE SIZE	CASING & TOBING SIZE								
V. TEST DATA AND REQUEST FO	OR ALLOWABLE		_				. b - 6.11 04 b		
OIL WELL (Test must be after recovery of total volume of load oil and must									
Date First New Oil Run to Tank Date of Test Producing Method (Flow, pump, gas lift, etc.)									
Longth of Tost	Tubing Pressure		Casi	Casing Pressure			Choke Size		
Length of Test	ength of Test Tubing Pressure			Casing Flessure					
Actual Prod. During Test	rual Prod. During Test Oil - Bbls.			Water - Bbls.			Gas-MCF		
GAS WELL									
Actual Prod. Test-MCR/D Length of Test				. Condensate/N	MCF	Gravity of	Gravity of Condensate		
				!		 	Glada Glas		
Testing Method (pilot, back pr.)	Tubing Pressure	(Shut-in)	Casi	ing Pressure (Sh	ut-in)	Choke Siz	æ		
	L							· · · · · · · · · · · · · · · · · · ·	
VI. OPERATOR CERTIFICA	VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION								
I hereby certify that the rales and	<i>r</i> e	 							
I hereby certify that the rates and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Date Approved JAN 10 1994									
	v d	<u>k</u>		H			/		
Signature				By 3 1) Chang					
JoAnn Smith	Engineering Tech			- SUPERV			ISOR DISTRICT #8		
Printed Name Title				Title				-	
<u>12-15-93</u>		(303) 837-5000							
Dat e				ш					

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.