Submit 3 Copies
Appropriate District Office
DISTRICT J
P.C. Box 1910, Hobbs, NM 88240

Energy, Minerals an

atural Resources Department

Form C-104 Revised 1-1-89 See Instructions

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

OIL CONSE P. ATION DIVISION

at Bottom of Page

Santa Fe. No

Box 2088

Mexico 87504-2088

DISTRICT III 1000 Rio Brizos Rd., Aziec, NM 87410 REQUEST FOR ALLC					\BLE AND AUTHORIZATION					
TO TRANSPORT					IL AND NATURAL GAS					
Openior Suyder Oil Corporation					Well APTNa 30-039-22252					
.f.ddre44					2020					
1625 Broadway, Reason(s) for Filing (Check proper box		200, De	enver, C	. (50202 Other (Please explain)					
New Well	,	Change is	Transporter (Out it tems express?					
Recompletion	Oil		Dry Gas			1	,			
Change in Operator					EFFECTIVE DATE 11/1/93					
If change of operator give game Are-	o Oil an	d_Gas (Company,	3	16 E. Mojave, Farm	ingto	n. N.M. 87	401		
					<u> </u>					
II. DESCRIPTION OF WEL	L AND LE		De al Maria	-	in Francisco	- V' 4	-(1	1		
Lease Name Jicarilla		112	Pool Name,		u g romsuos Gallup Dakota, Wes	l	of Lease Federal or Fee	JICIII	-	
Location		1 1 1 2	1 III III I		Salian Dakota, wes	<u></u>		1 310,111	······································	
Unit Letter K	:	1950	Feet From 1.		South Line and 1	650 F	et From The	West	Line	
Soction 6 Town	thip 241	√.	Range 41		NMPM	Ri	o Arriba		County	
II. DESIGNATION OF TRA		R OF O	IL AND I	TU						
. ume of Authorized Transporter of Oil	1 8 1	or Conder	20/		Address (Give address to which				•	
Giant Refining Company 4878/2					P. O. Box 256 Farmington, N. M. 87499					
Hame of Authorized Transporter of Casinghead Gas					Address (Give address to which approved copy of this form is to be sent) P. O. Box 4990, Farmington, N. M. 87499					
If well produces oil or liquida,	Uait	5∞c.	Twa		is gas actually connected?	Whea		11. 07477		
ive location of tanta.	Λ	5	24N	1	Yes	İ				
i. this production is commingled with the Y. COMPLETION DATA	at from any ex	her lease or	pool, give co.	لعسل.	ling order sumber:					
D : T (0 1:		Oil Well	Gas	4	New Well Workover	Doepea	Plug Back Sar	ne Res'v Dil	T Res'v	
Designate Type of Completio					<u> 1 </u>		<u> </u>	<u> </u>		
Duke Spudded	Date Com	pl. Ready to) Prod.		Total Depth		P.B.T.D.			
Lievations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Cas Pay	Tubing Depth	Tubing Depth			
Perforations					<u> </u>	Depth Casing Shoe				
	•	TUBING,	CASING .	(0)	CEMENTING RECORD					
HOLE SIZE	CA	CASING & TUBING SIZE			DEPTH SET		SACKS CEMENT			
							ļ			
							 	 		
							 			
Y. TEST DATA AND REQUI	EST FOR A	ALLOWA	ABLE					. 1	····	
OIL WELL (Test must be after				1	be equal to or exceed top allowal			d124 March 1	F TO	
Date First New Oil Rua To Tank	Date of To	c.			Producing Method (Flow, pump,	gas lift, s	u Maria			
Leagth of Test	Tubing I's	Tubing Presoure			Casing Pressure	Choke SINOV 1 5 1993				
Actual Prod. During Test	d Prod. During Test Oil - Bbl				Water - Bbla	C-OIL CON. DIV.				
The state of the s	Ou - Box	Ou - Bottle				DIST. 3				
GAS WELL										
Actual Prod. Test - MCF/D	Leagth c.	Longth C. Lort			Bbls. Condensate/MMCF	Gravity of Condensate				
Tubing Method (pilot, back pr.) Tubing 1		(-m)		Chaing Pressure (Shut-ia)		Choke Size	est seet			
					;					
I. OPERATOR CERTIFIC	CATE OF	COMP	LIANCE		011 00110	F D) /	ATION DI	MOLONI		
I hereby certify that the rules and regulations of the Oil Conservation					OIL CONSERVATION DIVISION					
Division have been complied with and that the information given above is true and complete 19 the best of my knowledge and belief.					Date Approved NOV 1 5 1993					
in true and comprise to the test of my	Filowicoge at	is neith.			Date Approved	141		, 		
Kaux Exhaller					1					
Signature FOUCHETA			O TEC:		Ву	الميندد) Chan	<u>{</u>		
KAY S. EUKSTEIN	<u> </u>	ILERIN	G TECH.				ISOR DISTR			
Printed Name	(505) <i>6</i>	32-80	Tille 56		Title					
1.11/1.22.2 Date		Telej	phone No.					•		

- INSTRUCTIONS: This form is to be filed in compliance with Rule 1101 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,