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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

OIL CONSERVATION DIVISION

P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088

ISTRICT III 000 Rio Brazos Rd., Azzec, NM 87410	REQU	JEST FO	OR AL	LLOWAE	BLE AND A	UTHORIZ	ZATION AS				
perator				-			Well A	PI No.			
lobil Producing TX. & N.M. In	c., Thr	u its Ag	ent M	lobil Expl	. & Prod.	U.s. Inc.					
ddreu P.O. Box 633 Midland, Te	exas 7	9702									
eason(s) for Filing (Check proper box)			~	antan afi	U OUM	er (Please expla CHANGE C	aur) ML/CONDEI	NSATE GAT	HER TO G	ARY	
ew Well	Oil	Change in	Dry G		W	ILLIAMS EN	ERGY EFF	. 6-1-90			
hange in Operator	Caninghet		Conde	_							
change of operator give name address of previous operator										 	
DESCRIPTION OF WELL	AND LE	ASE						Lease FED	1	ase No.	
se Name Well No. Pool Name, Includin						g Formation Kind of State, F.			07891		
LINDRITH B UNIT		18	LIND	RITH GAL	LUP-DAKO	IA, WEST					
Unit Letter E	:	1735	_ Feet F	rom The N	orth Lie	e and10	90F	et From The _	West	Line	
Dence 2 W					, NMPM, RIO ARRIBA County						
I. DESIGNATION OF TRANS		OF OF O	IL AN	ND NATU	Vommere (A.	e address to w	hich approved	copy of this for	rm is to be se	nt)	
GARY-WILLIAMS ENERGY COR					REPUBLIC PLAZA, 370 17 ST.STE 5300 DENVER CO.80202						
tame of Authorized Transporter of Casinghead Gas X or Dry Gas EL PASO NATURAL GAS CO					Address (Give address to which approved copy of this form is to be sent) P.O. BOX 1492, EL PASO, TX 79978						
well produces oil or liquids, we location of tanks.	Unit	Sec.	Twp.	Rge	Is gas actually connected? When			. 7			
this production is commingled with that i	from any of	ther lease or	pool, g	ive comming	ling order num	iber:					
V. COMPLETION DATA						,		Plug Back	Como Bosiu	Diff Res'v	
Designate Type of Completion	- (X)	Oil Wel	11)	Gas Well	New Weil	Workover	Deepen	Plug Back	Same Kes v	Dill Resv	
ale Spudded		npi. Ready 1	o Prod.		Total Depth	<u> </u>	_1	P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas	Pay		Tubing Dept	h		
								Depth Casing Shoe			
erforations											
	TUBING, CASING AND				CEMENT	CEMENTING RECORD			DADYO OFFICIA		
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
								+			
	ļ										
	 -										
TEST DATA AND REQUES IL WELL (Test must be after to	ST FOR	ALLOW	ABL	E	er he equal to t	or exceed top a	llowable for th	is depth or be	for full 24 ho	iers.)	
OLL WELL (Test must be after to Date First New Oil Run To Tank	Date of		e of load	a ou ana mu	Producing N	Method (Flow,	pump, gas lift.	elc.)			
Date First New Oil Russ 10 Tank	Date of	1 C St				R K	GE C A	- Charles			
length of Test	Tubing Pressure				Casing Pres		医宝司				
Actual Prod. During Test	Oil - Bbls.				Water - Bb		MT 1 iG	Gu- NCC			
•					JUN1 1 1990						
GAS WELL		=			·	ensue/MMCF	CON.	DIX	Condensate		
Actual Prod. Test - MCF/D	Length of Test						DIST. 3				
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)				Casing Pre	saure (Shut-ia)		Choke Size	:		
VI. OPERATOR CERTIFIC	CATE	OF COM	(PLIA	ANCE		011 00	MCED	/ATION	ואופו	ON.	
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 to the best of my knowledge and belief.					7-	Date Approved					
is true and complete to the best of my			-		∥ Da	re Abbro			d	/	
Signature	 ,			•	Ву			رالمند		CT 42	
SHIRLEY TOOD	<u> </u>	1,57 3-	Tid		Tiel	le	SU	PERVISO	K DISTR	UI 73	
Printed Name 6-8-90		(915)	688-	2585	. '''						
5		1	elenhor	ne No.	[1						

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