Submit 5 Copies
Apprepriate 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 III
1000 Rio Brazos Rd., Azzec, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

	TC	THAN	SPORT OIL	AND NA	UHAL GA		DI No		
perior Out of Drowfus Natural (Weil API No. 30-039-22916							
uis Dreyfus Natural Gas Corp.									
4000 Ouail Springs Par	kway, Su	ite 600) - Oklahor	na City,	OK 731	34			
eason(s) for Filing (Check proper box)				Othe	t (Please expla	iin)			
w Well	Ci Oil		ansporter of: ry Gas						
completion U	Cazinghead (_	ondensate						
hange of operator give name address of previous operator DEKAI			ny - 1625	Broadwa	v - Denv	er. CO	80202		
			17 1025						
DESCRIPTION OF WELL	AND LEAS	ell No. Pr	ool Name, Including	g Formation		Kind	of lesse	Lease No.	
Miles Federal	1.	1	Blanco Mesa	· 0			State Federal or Fee SF-(2
catios						_		_	
Unit Letter F	2300	F	eet From The $\frac{No1}{2}$	rth Line	and158	5 F	et From The	<u>Vest</u>	Line
Section 5 Townshi	p 26N	R	ange 7W	, NI	ирм,	Rio Arr	iba	Cou	nly
				241 646					
. DESIGNATION OF TRAN		OF OIL		Address (Giv	e address to w	hich approved	copy of this form	is to be sent)	
iant Refining	<u> </u>		<u> </u>	P.O. Bo	x 9156,	Phoenix	<u>AZ</u> 8506	8	
ame of Authorized Transporter of Casin	ghead Gas	o	r Dry Gaax 💢				l copy of this form		
l Paso Natural Gas	I this I See		l Pag	P.O. Box 1492, E1 Pasc Is gas actually connected? Whe					
well produces oil or liquids, e location of tanks.	Unuit		wp. Rge. 26N 7W	Yes Yes			•		
his production is commingled with that	from any other	lease or po	ol, give commingi		per:				
. COMPLETION DATA	 .					l Desert	Plug Back Sar	me Res'v Diff F	200'00
Designate Type of Completion		Oil Well	Gas Well	New Well 	Workover	Deepen	Ning pack 250	me kesv	(ES V
ue Spudded	Date Compl.	Ready to P	Tod.	Total Depth	·	1	P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Ton Oil/Con	Piv		Tubica Doub		
				Top Oil/Gas Pay			Tubing Depth		
riorations	_1			 	 		Depth Casing S	hoe	_
			CASING AND	CEMENTI			CAT	CKS CEMENT	
HOLE SIZE	CASI	NG & TUB	ING SIZE	 	DEPTH SET		- SAC	AND CEMENT	
. <u></u>	-								
TIPET DATA AND DECUE	CT FOR A	TOWA	RIF						
TEST DATA AND REQUE IL WELL (Test must be after	of FUK Al	d volume of	ניטיט Fload oil and must	be equal to or	exceed top al	iowable for 11	is depth or be for	full 24 hours.)	
ate First New Oil Run To Tank	Date of Test			Producing M	ethod (Flow, p	ump, gas lift,	etc.)		
				Casing Press	ure		Choke Size		
ength of Test	Tubing Press	en re		Casing 1 ices		₹ *			<u>. </u>
Actual Prod. During Test	Oil - Bbls.			Water - Bbis			Gas- MCF	1	
<u> </u>				<u></u>		. :	<u> </u>	है.चे र 	
GAS WELL								A	
Actual Prod. Test - MCF/D	Leagth of T	Leagth of Test		Bbls. Condensate/MMCF			Gravity of Condensate		
Mathed (nine hash)	Method (pilot, back pr.) Tubing Pressure (Shut-in)		(a)	Casing Pressure (Shut-in)			Choke Size		
esting Method (puot, back pr.)	. 50.25 1 100	(·•						
I. OPERATOR CERTIFIC	CATE OF	COMPI	LIANCE		011 00	NOCO	/ATION D	IVICION	
I hereby certify that the rules and reg	ulations of the	Oil Conserv	ation		OIL CO	コンドエノ	ATION D	- 2 1992	
Division have been complied with an is true and complete to the best of m	d that the inform	mation give:	a above		- A	~ ~l	14 O A	- 2 1332	
is the and countries of the new or in	,			Dat	e Approv	ea	3.1.>	0/	,
Vanne 7	1. dr	<u>m'</u>		p.,			•	· •	
Signature				By_			SUPERVISO	R DISTRICT	1
Ronnie K. Irani	Vi	ce Pres	ident -	Title	·				
October 16, 1992	(4	05) 749	1300 hone No					,	
Date		1 etek	ANAR 170.						خسي

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.