Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Anesia, NM 88210

## 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

TRICT III O Rio Brazos Rd., Azzec, NM 87410	REQUEST FOR ALLOWABLE	AND AUTHORIZATION	ON
	TO TRANSPORT OIL A		Well API No.
culor Giant Exploration & E	Production Company		30-045-23086
dress P.O. Box 2810, Farmingt	ton, New Mexico 87499	Other (Please explain)	
ason(s) for Filing (Check proper box)	Change in Transporter of:	Odici (Freeze cays: )	
w Well Completion	Oil Dry Gas	Effective Jul	y 1, 1990
ange in Operator	Casinghead Gas Condensate C n Development Company, P	0 Box 2810, Fari	nington, N.M. 87499
nange of operator give name Hixo	n Development Company, 1	.0. 1011	
DESCRIPTION OF WELL A	ND LEASE	Cornation	Kind of Lease Lease No.
se Name	Well No. Pool Name, Including  1 WAW Fruitlan	nd Sand-Pictured	State, Federal or Fee NM 036254-A
Phillips Federal		Cliffs	Feet From The North Line
cation E	790 Feet From The W	est Line and 1850	
Unit Letter	25N Range 1	2W , NMPM, SE	nn Juan County
Section 9 Township			
DESIGNATION OF TRANS	SPORTER OF OIL AND NATUR	Al, GAS  Address (Give address to which a	approved copy of this form is to be sent)
ame of Authorized Transporter of Oil	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
ane of Authorized Transporter of Casing	plicad Gas or Dry Gas XX	Address (Give address to which	approved copy of this form is to be sent)  Farmington, NM 87499
El Paso Natural Gas	Company	Is gas actually connected?	When
well produces oil or liquids,	Unit   Sec.   1 mp.	Yes	March 1, 1979
ve location of tanks.	from any other lease or pool, give commingli	ing order number:	
V. COMPLETION DATA		New Well   Workover	Deepen Plug Back Same Res'v Diff Res'v
Designate Type of Completion	lon tren	i 11_	P.B.T.D.
Designate Type of Compression	Date Compl. Ready to Prod.	Total Depth	1,5.7.5
	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Pointages		Depth Casing Shoe
Perforations			
	TINING CASING AND	CEMENTING RECORD	SACKS CEMENT
	CASING & TUBING SIZE	DEPTH SET	SAURO DEME
HOLE SIZE			
V. TEST DATA AND REQUI	EST FOR ALLOWABLE r recovery of total volume of load oil and mu	s he equal to or exceed top allow	vable for this depth or be for full 24 hours.)
OIL WELL (Test must be after	r recovery of total volume of total on the	Producing Method (Flow, pun	φ, gas lift, etc.)
Date First New Oil Run To Tank	Date of Test	D	Choke Size
Length of Test	Tubing Pressure	Casing Pressure	DECEIVE
	au Dila	Water - Bbis.	Carrier.
Actual Prod. During Test	Oil - Bbls.		JUL 3 1990
			OH CON TON
GAS WELL Actual Frod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	
	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke SiDIST. 3
l'esting Method (pitot, back pr.)	Tubing Pressure (Since in)		
TO A MOD CERTIF	ETCATE OF COMPLIANCE	OIL COL	NSERVATION DIVISION
VI. OPERATOR CERTIFICATE OF COMPLIANCE  1 hereby certify that the rules and regulations of the Oil Conservation  1 hereby certify that the rules and regulations of the oil Conservation given above			JUL 0 3 1990
Division have been complied with	and that the information given above	Date Approve	ed
is true and complete to the best of	(n) 200 mag	1	3 N d.
( Oche )	Culla	–    By	OUDEDVIOOR DISTRICT AS
Signature Aldrich L. Kuchera	a President		SUPERVISOR DISTRICT #3
	(505) 326-332	5    Title	
Printed Name 2 2 1990	Telephone No.		
Date		AND REAL PROPERTY AND REAL PROPERTY.	

- 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.

  3) Separate Form C-104 must be filed for each pool in multiply completed wells.