Submit 5 Copies Appropriate District Office

DISTRICTI
P.O. Box 1980, Hobbs, NM 88240

DISTRICTII

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 Pag

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

1														
Operator Giant Exploration & Production Company											Vell API No. 30-045-23086			
Adress P.O. Box 2810, Farmington, New Mexico 87499														
Reason(s) for Filing (Check prope		mington	, INC	w Mexic	0 0	1499		\Box	Other (pl	ease	explain)			
New Well],			Change in	Trai	nsporter of:			отт (р.		onpium)			
Recompletion	_	Oil				Dry Gas		X						
Change in Operator If change of operator give name	<u></u>	Casinghe	ad G	as		Condensate								
and address of previous operator														
II. DESCRIPTION OF V	WELL A	ND LE	EAS	E										
Lease Name	Well No. Pool Name, Including Form WAW Fruitland Sand – Pict				_					Lease No.				
Phillips Federal		1	W.	AW Fruitl	and S	Sand – Pictur	ed Cliffs	Sta	te, Federal o	r Fe	Federal		NM 036254-A	
Location Unit Letter E:	790	Feet From	m Th	. West	I ina	and	1850	,	Feet From T	.	North		1:	
	vnship		Ran			anu		- '	Juan	ne	NOITH		Line County	
Section 7 101	-mamp	2314	Kan	12 17		•	141011 101,	Jan	Juan				County	
III. DESIGNATION OF	TRAN	SPORT	ER	OF OII	L A)	ND NAT	URAL G	AS						
Name of Authorized Transporter	Address (Give address to which approved copy of this form is to be sent)													
Name of Authorized Transporter of Giant Exploration & Produ		Γ.	or Dry Gas X			Address (Give address to which app P.O. Box 2810, Farmingto				proved copy of this form is to be sent) On, NM 87499				
If well grpoduces oil or liquids, give location of tanks	Unit										then? 03-01-79			
If this production is commingled wi	th that fro	m any othe	er lea	se or pool.	give	comminglin	1	ber:			03-01-	13		
		,				<i>g</i>	6	-						
IV. COMPLETION DAT	Oil Well	Gas We		New Wel		Workover	Danne		Dive Deels	1	C D	. 1	Disc n	
Designate Type of Completion - (X)	On wen	Gas we	11	New Wel	"	WORKOVET	Deepen		Plug Back		Same Res	v	Diff Res'v	
Date Spudded	Date Compl. Ready to Prod.						Total Depth				P.B.T.D.			
Elevations (DF,RKB,RT,GR,etc.) Name of Producing Formation							Top Oil/Gas Pay				Tubing Depth			
Perforations	L						<u> </u>			•	Depth Cas	ing	Shoe	
		TUBIN	G, C	CASING	AN	ID CEME	NTING R	REC	ORD					
HOLE SIZE	CASING & TUBING SIZE						DEPTH SET				SACKS CEMENT			
	<u> </u>													
						. 45%	174			_	~			
V. TEST DATA AND R	EOUES	TFOR	AL.	I.O.W.A	REI	T TO SE	1111							
OIL WELL (Tost must be after	_						e allowable for th	is dep	th or be for full 2	4 hou	m.)			
Date First New Oil Run To Tank	Date of		15	1	<u></u>	o 1993	Producing I	Meth	od (Flow, pu	mp,	gas lift, etc	.)		
Length of Test	Tubing P	ressure	Ų.	13 BY	ie,	ani [Producing I	sure			Choke Size	e		
Actual Prod. During Test	Oil – B	bls.		Oli		0157.3	Water - E	Bbls.			Gas - M	CF		
GAS WELL					-									
Actual Prod. Test - MCF/D	Length o	f Tes					Bbls. Conde	ensate	e/MMCF		Gravity of	Con	densate	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)						Casing Pressure (Shut-in)							
VI. OPERATOR CERTI	FICAT	E OF C	ОМ	PLIAN	CE									
I hereby certify that the rules and regulations of the Oil Conservation							·	OIL	CONSE	RV	ATION I	Ν	TSION	
Division have been complied with and that the information given above is true and compelte to the best of my knowlegde and belief.											ALIC	2	7 1007	
CB								Ap	proved	-	AUG		3 1993	
Signature							Ву	0	riginal Si ar	hed	by FRANK	T.	CHAVEZ	
Jeffrey R. Vaughan Vice President Operations														
Printed Name AUG 2 0 1993		Title (505)22	6 2	225			Title		50	rth	KVISUR [<u> </u>	IRICT#3	
Date 1995		(505)32												
Date		Telephon	C MO.											

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 test 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, trasporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.