Submit 5 Copies Appropriate 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

DISTRICT II P.O. Drawer DD, Anesia, NM 88210		ox 2088 exico 87504-2088		
PISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	QUEST FOR ALLOWA		TION	
I. Operator Giant Exploration & Proc		AND WATER OF THE CORE	Well API No. 30-045-24	227
Address P.(). Box 2810, Farmington Reason(s) for Filing (Check proper box)		Other (Please explain)		
	Change in Transporter of: Dry Gas Chead Gas Condensate		Effective J	
and address of previous operator	evelopment Company,	P.O. Box 2810, Fa	rmington, N.M.	87499
II. DESCRIPTION OF WELL AND Lease Name	Well No. Pool Name, Includ	ing Formation	Kind of Lease State, Federal or Fee	Lease No. NM 25451

Address P.O. Box 2810, Farmin	gton, New Mex	kico 87499						
Reason(s) for Filing (Check proper box)	8		Other (Please expla	in)				
New Well	· - ·	Transporter of:						
Recompletion		Dry Gas	Effective July 1, 1990					
Change in Operator	Casinghead Gas	Condensate	D.O. Pay 2810			87499		
If change of operator give name Hix and address of previous operator	on Developmen	nt Company,	P.O. Box 2810,	Larminge	.011, 111111			
II. DESCRIPTION OF WELL	AND LEASE			Vind o	[Lease	Lease No.		
Lease Name	Well No.	Pool Name, Including	rer Gallup	State, I	ederal or Fee	NM 25451		
South Carson Federal	25 8							
Location Unit Letter H	_:1650	Feet From The	North Line and 330	Fcc	t From The Ea	st Line		
Section 25 Townshi	p 25N	Range 12W	, NMPM, San	Juan		County		
		TT ABID BIATTI	DAT CAS					
HI. DESIGNATION OF TRAN	SPORTER OF O	III, AND NATU	Address (Give address to wi	hich approved	copy of this form	is to be sent)		
Name of Authorized Transporter of Oil	PO Box 256. Framington, NM 87499							
Giant Refining Name of Authorized Transporter of Casim	ghead Gas	or Dry Gas	Address (Give address to w	hich approved	copy of this form	is to be sent)		
	Unit S∞.	Twp. Rgc.	Is gas actually connected?	When	?			
If well produces oil or liquids, give location of tanks.	i	i i i						
If this production is commingled with that from any other lease or pool, give commingling order number:								
IV. COMPLETION DATA			New Well Workover	Deepen	Plug Back Sa	ime Res'v Diff Res'v		
Designate Type of Completion	Oil We - (X)	ii Gas Weli	New West Workstein	,	LL			
Date Spanded	Date Compl. Ready	to Prod.	Total Depth		P.B.T.D.			
			Top O VGas Pay		Tubing Depth			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing I	Name of Producing Formation						
Perforations					Depth Casing	Shoc		
			CULTUING DECOL	21)	1			
	TUBING, CASING AND		DEPTH SET		SACKS CEMENT			
HOLE SIZE	CASING 8	CASING & TUBING SIZE		Der moe.				
The brother	SCT FOR ALLOW	ARLE	<u> </u>					
V. TEST DATA AND REQUE	ST FOR ALLOW	e of load oil and mus	t be equal to or exceed top all	ionable for the	is depth or he for	full 24 hows.)		
Date First New Oil Run To Tank	Date of Test		Producing Method (Flow, p	wnp, gas lift.	etc.)			
Trace I ma rich on the	_		C. in Discours		Choke Size			
Length of Test	Tubing Pressure		Casing Pressure	(0)	EGEI	VEID		
The Land Control of the Control of t	Oil - Bbls.		Water - Bbis.		Gas- MCF			
Actual Prod. During Test	On Don.				JUL 3 1	990		
CACAVELL					h-cokt	- Call		
GAS WELL Actual Prod. Test - MCI/D	Length of Test		Bbls. Condensale/MMCF	U	TEEDIN.			
			Casing Pressure (Shut-in)	· · · · · · · · · · · · · · · · · · ·	O.DIST.	3		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		C			·•		
AL ODED ATOD CEDTIES	CATE OF COM	MPLIANCE	0".00	NOEDY	/ATION F	NVISION		
VI. OPERATOR CERTIFICATE OF COMPLIANCE Thereby certify that the rules and regulations of the Oil Conservation			OIL CONSERVATION DIVISION					
triviales have been complied with and that the information given above		JUL 0 3 1990						
is true and complete to the best of m	y knowledge and belief	,	Date Approv	.ea		Λ		
100016	المريد المريد	<u></u>	Ву	7	ڪ دين	Throng		
Aldrich L. Kuchera President			Dy	C145	ក្រុលប្បទាំក្	DISTRICT \$::		
Pented Name		5) 326-3325	Title	001				
11JN 2 2 1990								
Date	•	Felephone No.						

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
- 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.