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

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

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

	, 12-00	TOTRA	NSPC	ORT OIL	AND NAT	URAL GA	.S				
nlor							Well A				
Giant Exploration & Production Company								0-045-26109			
Address P.O. Box 2810, Farming	ton, l	New Mex	ico	87499							
Reason(s) for Filing (Check proper box)					Othe	(Please expla	in)				
New Well		Change in									
Recompletion	Oil		Dry Gas				Effect:	ive July	1, 1990)	
Change in Operator			Conden		D O P.	. 2010 1					
f change of operator give name Hixo	n Deve	elopmer	it Co	mpany,	P.O. Bo	2810, 1	ratming	.011, 11111	. 0/4//		
II. DESCRIPTION OF WELL A	ND LE	ASE									
Lease Name	Well No. Pool Name, Include				ng Formation Kind of			Lease Lease No. ederal or Fee NM 58138			
Badlands Federal		3	<u></u>	Bisti L	ower Gal	Lup		Federal NH 30130			
Location Unit LetterI	:20)60	Feet Fr	om TheS	outh Line	and) Fa	et From The _	East	Line	
Section 13 Township	25	5N	Range	13W	, NI	ирм, Sa	an Juan			County	
				n stanti	DAT CAS						
III. DESIGNATION OF TRANS	SPORTE	CR OF O	IL AN	D NATU	Address (Giv	address to wh	ich approved	copy of this fo	orm is to be see	nt)	
Name of Authorized Transporter of Oil XX or Condensate					PO B	Address (Give address to which approved copy of this form is to be sent) PO Box 256, Farmington, NM 87499					
Giant Refining Name of Authorized Transporter of Casing	head Gas or Dry Gas			Gas [Address (Give address to which approved cop				orm is to be se	nt)	
Living or transporter or comit											
if well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	i	ls gas actuali		When	? 		<u>.</u>	
If this production is commingled with that i	from any of	her lease or	pool, gi	ve comming	ing order num	жг					
IV. COMPLETION DATA						Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	- (X)	Oil Wel	, j '	Gas Well	I New Well	I	Dayon		İ	j	
Date Spudded	Date Compl. Ready to Prod.				Total Depth			P.B.T.D.			
Date Spooted		,									
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay				Tubing Depth		
Perforations	J							Depth Casir	ng Shoe		
	TUBING, CASING AND					CEMENTING RECORD					
HOLE SIZE		CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT		
11022 0102								 -			
V. TEST DATA AND REQUES	T FOR	ALLOW	ABLE		1	·····					
OH WELL Clest must be after t	ecovery of	total volume	of load	oil and mus	be equal to o	exceed top all	owable for th	s depth or be	for full 24 hou	rs.)	
OIL WELL (Test must be after recovery of total volume of load oil and must Date First New Oil Run To Tank Date of Test					Producing M	ethod (Flow, p	ump, gas lýt,	elc.)			
					Carina Danie			Longia Since	INF	<u> 1</u>	
Length of Test	Tubing Pressure				Casing Pressure			ECE	A A co	<i>\\\\</i> \\\	
	Oil - Bbls.				Water - Bbls.			Gas- MCF			
Actual Frod. During Test								JUL 3 1990			
	.1								IN DI	\ /	
GAS WELL	I engile o	V Test			Bbls. Conde	nsate/MMCF		OHE WITH	Condehence		
Actual Prod. Test - MCI/D Length of Test								Choke Size	ST. ?		
Tosting Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pres	Casing Pressure (Shut-in)			1		
		TE COL	IDT IA	NCE	-			: : :	D.11.011		
VI. OPERATOR CERTIFIC	VIFC	かいCOM	arvation	aver.	11	OIL CO	NSERV	MOLLA	DIVISIO	JIV.	
I hereby certify that the rules and regu- Division have been complied with and	l that the it	iformation g	pven 200	ive							
is true and complete to the best of my	knowledge	c and belief.			Dat	e Approv	ed	<u> </u>	10:37)		
// /	1.				=				Λ		
(bulle	<u>(c</u>	ul	<u> </u>	27	∥ Bv.		3	<u> </u>	1) 1		
Signature Aldrich L. Kuchera		Pres	iden	t	-,			•		• 4	
Printed Namper 1390 (505) Title (505) 326-3325					Titl	e	SUPER	MISCR D	istrior	<i>V</i> 3	
			alanhone								

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.