Submit 5 Copies
Appropriate District Office
DISTRICT 1
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., Aztec, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.	Ţ	O TRAI	NSPC	ORT OIL	AND NA	TURAL GA	<u>\S</u>	161.51			
Operator	tion & Draduction Company							Well API No.			
Giant Exploration & Production Company 30-045-27125											
Address P.O. Box 2810, Farmington, New Mexico 87499											
Reason(s) for Filing (Check proper box) Other (Please explain)											
New Well Change in Transporter of:											
Recompletion Oil Dry Gas Change in Operator Casinghead Gas Condensate Effective July 1, 1990											
Change in Operator (A) Casinghead Gas Condensate Company, P.O. Box 2810, Farmington, N.M. 87499											
and address of previous operator Hixon Development Company, F.O. Box 2010, Farmington, 1977											
II. DESCRIPTION OF WELL AND LEASE											
Lease Name Well No. Pool Name, Including								f Lease Federal or Fee		ase No.	
Ginny Collect 1 Bisti Bowel Gallup Federal Mi 70037											
Location Line 1770 Feet From The Court by Line and 1770 Feet From The East Line											
Unit Letter J : 2310 Feet From The South Line and 1770 Feet From The East Line											
Section 31 Township 25N Range 11W , NMPM, San Juan County											
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil XX or Condensate Address (Give address to which approved copy of this form is to be sent)											
Giant Refining	PO Box 256, Farmington, NM 87499										
Name of Authorized Transporter of Casinghead Gas X or Dry Gas						Address (Give address to which approved copy of this form is to be sent)					
Giant Exploration & Production Company					PO Box 2810, Farmington, NM					99	
f well produces oil or liquids, Unit Sec. Twp. ive location of tanks. J 31 25N				Rgc. 11W	Is gas actually connected? When Yes J			? anuary 24,1989			
If this production is commingled with that f					I.,	ber:		undary	21,11303		
IV. COMPLETION DATA	iom any out		Bi								
		Oil Well	10	Gas Well	New Well	Workover	Decpen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion -		<u></u>			Total Depth	<u></u>	L	P.B.T.D.	l		
Date Spudded	Date Compl	. Ready to	Prod.		Total Deput			P.B.1.D.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas	Top Oil/Gas Pay			Tubing Depth		
Elevations (DP, KKB, KI, OK, Ele.)								•			
Perforations	· · ·			Depth Casin	g Shoc						
TUBING, CASING AND CEMENTING RECORD											
	CEMENTI		<u>D</u>	SACKS CEMENT							
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SAONS CEMENT			
								ل			
V. TEST DATA AND REQUES OIL WELL (Test must be after re	T FOR A	LLOWA	BLE		L	aread top alle	numble for this	denth or he i	for full 24 how	·s.)	
			oj toda o	u ana musi	Producing M	ethod (Flow, pu	unp, gar lýt, e	Ic.)			
Date Pirst New Oil Run 10 1411k	First New Oil Run To Tank Date of Test									- 7	
Length of Test	Tubing Pressure				Casing Press	Casing Pressure			EIV	s M	
					- In			Gas- MCF			
Actual Prod. During Test	uring Test Oil - Bbls.				Water - Bols.			JUL 3 1990			
					l						
GAS WELL					Illble Conde	nsate/MMCF			Control of Condensate		
Actual Prod. Test - MCF/D	Length of Test			Bus. Condensationalistics			DIST. 3				
Testing Method (pitot, back pr.)	hod (pilot, back pr.) Tubing Pressure (Shut-in)				Casing Press	ure (Shut-in)	<u> </u>	Choke Size			
Hosning tricerion (butter over by A								<u> </u>			
VI. OPERATOR CERTIFIC	ATE OF	COMP	LIAN	ICE			ICEDV	ATION	חוייופוכ	NI.	
I hereby certify that the rules and regulations of the Oil Conservation						OIL CONSERVATION DIVISION					
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					Date Approved JUL 0 3 1990						
is true and complete to the sear of my	Date	e Approve	ea	000							
(elen torren							— {: .	0	1		
Signature Aldrich L. Kuchera President					By-	Ву					
District Name Title					Title		SUPER	avison i	DISTRICT	#3	
IN 2 2 1830											
Date Telephone No.						···	سنجر سحد				

- 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.
- Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 Separate Form C-104 must be filed for each pool in multiply completed wells.