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

DISTRICT III			
1000 Rio Brazos	Rd., Azicc, NM	87410	_

DISTRICT II P.O. Drawer DD, Antesia, NM 88210					
DISTRICT III 1000 Rio Brazos Rd., Azicc, NM 87410	·		TON .		
I. TO TRANSPORT OIL AND NATURAL GA					
Openior  Giant Exploration &	Production Company		Well API No. 30-045-27:562		
Address P.O. Box 2810, Farmi					
Reason(s) for Filing (Check proper box)		Other (Please explain)			
New Well Recompletion	Change in Transporter of: Oil Dry Gas				
Change in Operator  If change of operator give name	Casinghead Gas Condensate				
and address of previous operator			,		
II. DESCRIPTION OF WELL Lease Name	AND LEASE   Well No.   Pool Name, Includ	ing Formation	Kind of Lease No.		
Carson Unit 15		uitland Coal	State, Federal or Fic NM 070322		
Location Unit Letter K	: 1610 Feet From The S	outh Line and 1560	Foot From The West Line		
Section 15 Townshi	p 25N Range 12W	, NMPM, San	Juan County		
III. DESIGNATION OF TRAN	SPORTER OF OIL AND NATU	RAL GAS	·		
Name of Authorized Transporter of Oil	or Condensate		oproved copy of this form is to be sent)		
Name of Authorized Transporter of Casin			oproved copy of this form is to be sent)		
Giant Exploration &  If well produces oil or liquids,	Production Company   Unit   Sec.   Twp.   Rgc.	P.O. Box 2810, Fa	rmington, N.M. 87499		
give location of tanks.		NO	·		
If this production is commingled with that IV. COMPLETION DATA	from any other lease or pool, give comming				
Designate Type of Completion	- (X) Oil Well Gas Well X	New Well Workover Do	cepen   Plug Back   Same Res'v   Diff Res'v		
Due Spuded 09-13-90	Date Compl. Ready to Prod. 11-05-90	Total Depth 1145	P.B.T.D. 1109.33'		
Elevations (DF, RKB, KT, GR, etc.) 6250 GLE	Name of Producing Formation Fruitland Basal Coal	Top Oil/Gas Pay 1027	Tubing Depth 1015		
Perforations 1027'-1045'			Depth Casing Shoe		
	TUBING, CASING AND		SACKS OF USAT		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET 121.93'	SACKS CEMENT 60sks		
8-3/4" 6-1/4"	4-1/2"	1144.73'	130sks		
	1-1/2"	1015'			
V. TEST DATA AND REQUES	FOR ALLOWABLE ecovery of total vol. une of load oil and must	he equal to an exceed top allowable	(or this denth or be (or full 24 hours.)		
OIL WELL (Test must be after r Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, ga	25 1/p, etc.) (5) [ 6 6 1 1 1 1		
Length of Test	Tubing Pressure	Casing Pressure	Choke Sale		
Actual Prod. During Test	Oil - Bbis.	Water - Bbls.	Gas MCF MARI 5 1881		
CACAMELI		(H) (N) X 198	DIV DIL COM. GEL -		
GAS WELL Actual Prod. Test - MCIVD	Length of Test	Buls. Condensate/MMCP	Gravity of Condensate		
307	24 hours Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Gioke Size		
Tosting Method (pites, back pr.)	125	125	3/4"		
VI. OPERATOR CERTIFICATE OF COMPLIANCE  Thereby certify that the rules and regulations of the Oil Conservation		OIL CONSE	RVATION DIVISION		
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		Doto Approved	MAR 1 5 1991		
is the same complete to the cost of thy anoverlage and center.		Date Approved	1 1		
Signature		By	DIA / CHANGE		
Aldrich L. Kuchera President Printed Name Title		Title	SUPERVISOR DISTRICT #2		
NOV 1 4 1990 Date	(505) 326-3325. Telephone No.				
	entales and the standard date of the first of the entire of the first of the contract of the standard of the s	Control of the state of the sta	Control of the second s		

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.