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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., Azicc, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION PORT OIL AND NATURAL GAS

I		IO IHAI	42LOL	11 OIL	AND NAT	0, 1, 12 01	Well A	Pl No.			
Operior Giant Exploration & Production Company						30-045-27666					
Address			7499								
P.O. Box 2810, Farming	gton,	N.M. 8	7499		Other	(l'lease expl	ain)				
Reason(s) for Filing (Check proper box)		Change in 7	Fransoxote	r of:							
Tick item	Oil Dry Gas										
Recompletion \square	miple and a second seco										
Change in Operator											
f change of operator give name and address of previous operator											
II. DESCRIPTION OF WELL AND LEASE							Kind C	(Lease	Le	ise No.	
Lease Name		Well No. Pool Name, Including 331 Basin Frui			g romadon Etland Co	al	State, 1	State, Federal or Fee		SF 078064	
Carson Unit 13 458	331 1					<u>1P</u>	- Paderar				
Location B	. 99	0.	Feet From	The	orth_Linc	and18	310 Fc	et From The	East	Line	
Unit Letter							San Ju	an		County	
Section 13 Township	25N	<u> </u>	Range	12W	, NM	IPM,	Dan Ju			County	
III. DESIGNATION OF TRAN	ודמ <i>ח</i> מפ	रत यत वर	T. AND	NATUI	RAL GAS						
Name of Authorized Transporter of Oil	Address (Give address to which approved copy of this form is to be sent)										
2819202 - 2819202 -											
		as Day C	as XX	Address (Give	address 10 %	vhich approved	copy of this form is to be sent) ton. N.M. 87499				
Giant Exploration & Production Co.				<u> </u>	P.O. Box 2810, Farmington, N.M. 87499						
If well produces oil or liquids,	iquids, Unit Soc.			Rgc. 12W	Is gas actually connected? Who			•			
give location of tanks. If this production is commingled with that	B	lar lease of	25N			er:					
IV. COMPLETION DATA	.10111 203 0	anci 10230 01 j	, , , , , , , , , , , , , , , , , , ,					·		bice purity	
	~	Oil Well		s Well	New Well	Workover	Deepen	Plug Back S:	ıme Res'v	Dist Res'v	
Designate Type of Completion		- Pandy Io			Total Depth			P.B.T.D.		_\	
Date Spudded	Date Compl. Ready to Prod. 8-28-90			1320'			1278.79'				
3-30-90 Elevations (DF, RKB, RT, GR, etc.)	PKR RT GR. etc.) Name of Prox				Top Oil/Gas I	,a À		Tubing Depth 1092			
6361' GLE Fruitland Basal Coal					1117'			Depth Casing Shoe			
Perforations 1117'-1119', 1124'-1	1201	11201_1	1 / 1 1	11/49-	111501.	1154'-1	158'	Depair Casing .	J.100		
1117'-1119', 1124'-1	128',	1138 -1	141 ,	1149	CEL CENTER	IC PECO	RD.	<u> </u>			
				TUBING, CASING AND			T	SACKS CEMENT			
1.000		ASING & TUBING SIZE			127.	DEPTH SE	······································	60 sks.			
8-3/4"		7"						155 sks.			
6-1/4"			4-1/2" 1-1/2"		1322.95' 1092'						
		1-1/2"			1092						
V. TEST DATA AND REQUES	TFOR	ALLOWA	ABLE		l				c # 04 l	1	
OIL WELL (Test must be after r	ecovery of	total volume	of load oil	and must	be equal to or	exceed top al	llowable for thi	s depth or be for	јші 24 пош	5.)	
Date First New Oil Run To Tank	ेट्र			Broducing Method (Lion, brank, 200).			:16.)				
		.			Paring Pressures IVE			Choke Size			
Length of Test	Tubing P	ressure		9	Cusing Pressu	Logana gr ∌:		Choke bize			
				Ĺ	Water S pbR	1 0 1001		Gas- MCF			
Actual Prod. During Test	Oil - Bbl	s.			Water & Bolan	£ 0 1000	,				
			 		OIL C	ON. D					
GAS WELL	· (1)	CT-c:			Bbls. Cond	SAME		Gravity of Cor	densate		
Actual Prod. Test - MCF/D	Length o	i Test i hrs.			I.)		N/A			
No flow		ressure (Shu	t-in)		Casing Press	•		Choke Size			
Tosting Method (pitot, back pr.)		68 psi				6 psi		N/A			
ALL ODED ALOD GEDILLIC			MALIC	CE			NOTE	ATION D	11/1016	N	
VI. OPERATOR CERTIFICATE OF COMPLIANCE						JIL CO	MOFHA	ATION D	00 1010	714	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					SEP 2 4 1990						
is true and complete to the best of my knowledge and belief.					Date	. Approv	ed				
							7.	> d.	/		
1 begins d	urg_			∥ ву_	By						
Signature: Aldrich L. Kuchera President					SUPERVISOR DISTRICT #3						
Printed Name 1990		5) 326-	Title		Title						
SEP .	() ()	Tel	ephone No).						· · · · · · · · · · · · · · · · · · ·	
Date			entra in Superior	सम्बद्धाः सम्बद्धाः सम्बद्धाः	of the state of the state of the	etikatan,030, so	STANSACTION OF STA	e topics to an annual con-	galan a service and a service		

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.
- 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.

