Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Artesia, NM 88210

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., Artec. NM 87410

REQUEST FOR	ALLOWABLE AND	AUTHORIZATION

XXX Rio Brazos Rd., Azzec, NM 8/410	REQU	JEST F	OR	ALLO	OWABI	LE AND	AUTHORIZ ATURAL GA	ZATION AS					
in all of		IO IHA	NNS	- UF	11 UIL	WIAD IN	TONAL GA	Well A	PI No.				
Giant Exploration &	Produc	Production Company							30-045-27672				
ddress P.O. Box 2810, Farmi	ngton, l	New Me	xic	0 8	37499			, ,					
eason(s) for Filing (Check proper box)		C i-	Tenn	morter	· of:	□ 0	her (Please expla	in)					
lew Well	Oil	Change in	Dry	-	" .								
ecompletion U	Oil Casinglica			Gas densate			Effectiv	e July	1, 1990				
		_				D 0 D				. 87499			
change of operator give name d address of previous operator	xon Deve	elopme	nt (Comp	oany,	P.O. B	ox 2810,	ratming	on, N.n	. 0/4//			
. DESCRIPTION OF WELL	ANDIE	ASE											
ease Name	MIND DIS	Well No. Pool Name, Including Formation							Lease	L.	Lease No.		
Bisti Coal 12 1 Basin Fruit							ederal or Fee	SF 0	78064				
ocation					N -		2510			East	·		
Unit LetterB	:	90	_ Fect	From	The NO	rtn_L	ine and	Fee	t From The _		Line		
Section 12 Towns	nip 2.	5N	Ran	ge	12	.W	NMPM,	San	Juan		County		
II. DESIGNATION OF TRA	NSPORTE	ER OF C	IL A	AND	NATUF	RAL GA	S						
Name of Authorized Transporter of Oil		or Conde	nsale			Address (C	ive address to wi	hich approved	copy of this f	orm is to be ser	η)		
Name of Authorized Transporter of Cas	inghead Gar		or F	Dry G	ıs [X]	Address (C	ive address to w	hich approved	copy of this f	orm is to be ser	nt)		
		,	01 2	J., O.	تم ت		Box 4990.						
El Paso Natural Gas f well produces oil or liquids,	Unit	Sec.	Τw	p.	Rgc.		ally connected?	When					
ive location of tanks.	1	1	i,	'ni	0	No							
this production is commingled with the	at from any ot	her lease o	pool,	, give	commingli		mber:						
V. COMPLETION DATA													
T. COMILECTION SILL		Oil We	11	Gai	Well	New Wo	II Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Designate Type of Completio		_i		<u>i</u>				<u> </u>		J			
Date Spudded	Date Corr	Date Compl. Ready to Prod.				Total Dep	h		P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	s (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/Gas Pay Tubing Depth								
						L			Depth Casin	ng Shoe			
Perforations									<u> </u>				
		THRING	. CA	SING	G AND	CEMEN	TING RECO	RD					
UOLE 817E		CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT					
HOLE SIZE	<u> </u>												
							· · · · · · · · · · · · · · · · · · ·		ļ				
. TEST DATA AND REQU	EST FOR	ALLOW	ABI	LE				lamakte Car ele	e denth or he	for full 24 hou	ars.)		
OIL WELL (Test must be ofte	r recovery of	total volum	e of lo	oad oil	and must	be equal to	or exceed top all	owable for the	s aepin or be	jor juii 14 nou			
Date First New Oil Run To Tank	Date of T					Producing	Method (Flow, p	ump, gas tyt, t	:16./				
						Cation De	redim		Q k zd	LIVE	កា		
Length of Test	Tubing P	Tubing Pressure				Casing Pro	,aouit	ID.			-		
octual Prod. During Test Oil - Bbls.			Water - B	bls.		Gas- MCF	- 4000	$\Gamma_{\Gamma_{i}}$					
Actual Flor Danis test	J., 201	-							JUL	3 1990			
GAS WELL									NI CO	ום אכ	\ :		
Actual Prod. Test - MCF/D	Length o	Test				Bbls. Con	densate/MMCF	,	Jan Jak	Conocarate	-		
									DI	31. 3			
l'esting Method (pitot, back pr.)	Tubing I	Tubing Pressure (Shut-in)				Casing Pr	essure (Shut-in)		Choke Size	;			
.						<u> </u>					.		
VI. OPERATOR CERTIF	ICATE C	F COM	IPLI	IAN	CE	11	011 00	NCEDV	ΆΤΙΩΝ	DIVISIO	ON .		
I hereby certify that the rules and regulations of the Oil Conservation				1	OIL CONSERVATION DIVISION . JUL 0 3 1990								
Division have been complied with	and that the in	formation p	given a	above		11			JUL U	ə 199U			
is true and complete to the best of t	ny knowledge /	and belief	•			D:	ate Approv			A			
in 6 1 1	(- _	, ,	. ,					3.	۸), E	1/2 /	r		
- Colar C	Ce	ac	_(∥ B	/						
Signature Aldrich L. Kuchera		Pres						SUPE	NOSIVE	DISTRICT	13		
Printed Name 2 2 1990		(503	T) T	itle 326-	3325	Ti	tle						
Date				one N									
DAIC		_								الأسير وسيوون			

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.