

Submit 5 Copies  
Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

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

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

State of New Mexico  
Energy, Minerals and Natural Resources Department

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

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

I.

Operator Hixon Development Company <i>Hixon E+P Co</i>	Well API No. 30-045-27680
Address P.O. Box 2810, Farmington, N.M. 87499	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>

If change of operator give name and address of previous operator \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name East Bisti Coal 8	Well No. 2	Pool Name, Including Formation Basin Fruitland Coal	Kind of Lease State, Federal or Fee Federal	Lease No. SF 078062-A
Location Unit Letter <u>K</u> : <u>1800</u> Feet From The <u>South</u> Line and <u>1800</u> Feet From The <u>West</u> Line Section <u>8</u> Township <u>25N</u> Range <u>11W</u> , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> <i>Hixon Development Company</i> <u>2807223</u>	Address (Give address to which approved copy of this form is to be sent)	
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <i>Hixon Development Company</i> <u>2807222</u>	Address (Give address to which approved copy of this form is to be sent) P.O. Box 2810, Farmington, N.M. 87499	
If well produces oil or liquids, give location of tanks.	Unit <u>K</u>	Sec. <u>8</u>
	Twp. <u>25N</u>	Rge. <u>11W</u>
	Is gas actually connected? <u>No</u> When ?	

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X	X					
Date Spudded 5-4-90	Date Compl. Ready to Prod. 8-26-90		Total Depth 1310'		P.B.T.D. 1280'			
Elevations (DF, RKB, RT, GR, etc.) 6360' GLE	Name of Producing Formation Fruitland Basal Coal		Top Oil/Gas Pay 1170'		Tubing Depth 1190'			
Perforations 1170' - 1178'					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
8-3/4"	7"	128.35'	60 sks.
6-1/4"	4-1/2"	1312'	155 sks.
	2-3/8"	1190'	

V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

**RECEIVED**  
AUG 30 1990

GAS WELL

Actual Prod. Test - MCF/D 3.89	Length of Test 24. hours	Bbls. Condensate 0	Gravity of Condensate N/A
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in) 140#	Casing Pressure (Shut-in) 180#	Choke Size 1/4"

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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.

*Aldrich L. Kuchera*  
Signature  
Aldrich L. Kuchera President  
Printed Name  
AUG 29 1990 (505) 326-3325  
Date Telephone No.

OIL CONSERVATION DIVISION  
SEP 14 1990

Date Approved \_\_\_\_\_  
By *Burt D. Shuf*  
Title SUPERVISOR DISTRICT #3

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.