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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

## 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, Anesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

| ·  | 1                          | UIMA                               | 1401        | // OIL          | 71112 1471  | OI I/ LE CI/              | 1 11/211      | IPI No                           |                     |                                       |  |  |
|--|----------------------------|------------------------------------|-------------|-----------------|---|---------------------------|---------------|----------------------------------|---------------------|---------------------------------------|--|--|
| Operator   |                            |                                    |             |                 |   |                           | Well API No.  |                                  |                     |                                       |  |  |
| Hixon Development Company  |                            |                                    |             |                 |   |                           | 30-045-27689  |                                  |                     |                                       |  |  |
| P.O. Box 2810, Farmi   | ngton. N                   | ew Mex                             | ico         | 87499           |   |                           |               |                                  |                     |                                       |  |  |
| leason(s) for Filing (Check proper box)  |                            |                                    |             |                 | Otho  | r (Please expla           | iin)          |                                  |                     |                                       |  |  |
| New Well   |                            | Change in                          | Transpor    | ter of:         |   |                           |               |                                  |                     |                                       |  |  |
| Recompletion   | Oil                        |                                    | Dry Gas     |                 |   |                           |               |                                  |                     |                                       |  |  |
| hange in Operator  | Casinghead                 |                                    | Condens     |                 |   |                           |               |                                  |                     |                                       |  |  |
| change of operator give name   |                            |                                    |             |                 |   |                           |               |                                  |                     |                                       |  |  |
| ad address of previous operator  |                            |                                    |             |                 |   |                           |               |                                  |                     | ,                                     |  |  |
| DESCRIPTION OF WELL AND LEASE Well No.   Pool Name   |                            |                                    |             |                 | E F   |                           |               | Kind of Lease                    |                     | ase No.                               |  |  |
| Case Name<br>Bisti Coal 7  |                            | Well No.                           |             |                 | tland Co  | oal                       | State,        | State, Federal or Fee<br>Federal |                     | NM 25444                              |  |  |
| ocation K  | 237                        | 5                                  | East Err    | Som The         | uth   | 152                       | 20 Fo         | et From The                      | West                | Line                                  |  |  |
| Unit Letter  | ·                          | -                                  |             |                 |   | , <b></b>                 |               | - T.,                            |                     |                                       |  |  |
| Section 7 Towns  | hip 25N                    |                                    | Range       | 12W             | , NI  | мрм,                      | San Jua       | an                               |                     | County                                |  |  |
| II. DESIGNATION OF TRA   | NSPORTE                    | R OF O                             | IL AN       | D NATU          | RAL GAS   |                           |               |                                  |                     |                                       |  |  |
| Name of Authorized Transporter of Oil or Condensate  |                            |                                    |             |                 | Address (Give address to which approved copy of this form is to be seril) |                           |               |                                  |                     |                                       |  |  |
| Name of Authorized Transporter of Cas  |                            |                                    | or Dry      | Gas X           |   |                           |               | copy of this form                |                     |                                       |  |  |
| Eixon Development Co   |                            |                                    | l m         | <del></del>     |   |                           |               |                                  | 0,7                 |                                       |  |  |
| I well produces oil or liquids, ive location of tanks.   | Unit                       | Soc.                               | Twp. Rgc.   |                 | Is gas actually connected?  |                           | ј млел        | When ?                           |                     | · · · · · · · · · · · · · · · · · · · |  |  |
| this production is commingled with th  | at from any oth            | er lease or                        | pool, giv   | e commingl      | ing order num   | oer:                      |               | ,                                |                     |                                       |  |  |
| V. COMPLETION DATA   | -,                         |                                    |             |                 |   |                           |               |                                  |                     | <u> </u>                              |  |  |
|  |                            | Oil Well                           | ·   C       | Sas Well        | New Well  | Workover                  | Deepen        | Plug Back   Sa                   | me Res'v            | Diff Res'v                            |  |  |
| Designate Type of Completio  |                            | 1                                  |             | X               | X   | L                         | ]             | J                                |                     |                                       |  |  |
| Date Spudded   | Date Compl. Ready to Prod. |                                    |             |                 | Total Depth   |                           |               | P.B.T.D.                         |                     |                                       |  |  |
| 5-22-90  | 6-17-90                    |                                    |             | 1400'           |   |                           | 1342.35'      |                                  |                     |                                       |  |  |
| Elevations (DF, RKB, RT, GR, etc.)   |                            | Name of Producing Formation        |             |                 |   | Top Oil/Gas Pay           |               |                                  | Tubing Depth 1202'  |                                       |  |  |
| 6340' GLE Fruitland Basal Coal   |                            |                                    |             |                 | 1202'   |                           |               | Depth Casing Shoe                |                     |                                       |  |  |
| erforations  |                            |                                    |             |                 |   |                           |               | Julyui Casiiig S                 |                     |                                       |  |  |
| 1202' - 1224'  |                            |                                    |             |                 | CTT) (77) 107   | NO PEOOP                  | T)            | 1                                |                     |                                       |  |  |
|  |                            | TUBING, CASING AND                 |             |                 |   | NG RECOR                  | N             | SACKS CEMENT                     |                     |                                       |  |  |
| HOLE SIZE  |                            | CASING & TUBING SIZE               |             |                 |   | DEPTH SET                 |               |                                  |                     |                                       |  |  |
| 8-3/4"   |                            | 7"                                 |             |                 | 125   |                           |               | 60 sks.                          |                     |                                       |  |  |
| 6-1/4"   |                            | 4-1/2"                             |             |                 | 1386  |                           |               | 165 sks.                         |                     |                                       |  |  |
|  | 1-                         | 1-1/2"                             |             |                 |   | 12021                     |               |                                  |                     |                                       |  |  |
|  |                            |                                    | · DV E      |                 | <u> </u>  |                           |               |                                  |                     |                                       |  |  |
| . TEST DATA AND REQU   | EST FOR A                  | LLOW                               | ABLE        |                 | 1   | aread top all             | oughle for th | is denth or be for               | full 24 hou         | rs.)                                  |  |  |
| OIL WELL (Test must be afte  |                            |                                    | of load o   | ou and must     | De equal to of  | exceed top all            | umn, eas lift | elc.)                            | ,                   |                                       |  |  |
| Pale First New Oil Run To Tank Date of Test  |                            |                                    |             |                 | Producing Method (Flow, pump, gas lift, etc.)                             |                           |               |                                  |                     |                                       |  |  |
| Length of Test   | Tubing Pre                 | -sum                               |             |                 | Casing Press  | are (1)                   | <u> </u>      | Show Sh                          |                     |                                       |  |  |
| Length of Test   | Tuoing Fie                 |                                    |             |                 |   |                           |               | <b>U</b>                         |                     |                                       |  |  |
| Actual Prod. During Test   | Oil - Bbls.                | Oil - Bbls.                        |             |                 |   | <u> </u>                  | IN2 TH        | 9 <b>90</b> - MCF                |                     |                                       |  |  |
| Demai tion rating too.   | Jii - Dois.                |                                    |             |                 |   |                           |               |                                  |                     |                                       |  |  |
|  | 1                          |                                    |             |                 | 1   | Oll                       | CON           | DIV                              | ,                   |                                       |  |  |
| GAS WELL   |                            | Tac'                               |             |                 | Bbls Conde  | nsale/MMCF                | Net           | Gravity of Con                   | densate             |                                       |  |  |
| Actual Prod. Test - MCF/D  | 1 -                        | Length of Test                     |             |                 |   |                           | - 10in        | -                                | <del>~ i i i</del>  | -                                     |  |  |
| 150  |                            | 24. hrs. Tubing Pressure (Shut-in) |             |                 |   | Casing Pressure (Shut-in) |               |                                  |                     |                                       |  |  |
| Testing Method (pitot, back pr.)   |                            | Jubing Pressure (Shut-m)           |             |                 |   | 67                        |               |                                  | 3/8"                |                                       |  |  |
| VI. OPERATOR CERTIF  |                            |                                    | PLIAN       | NCE             | -\  |                           | NSEDV         | ATION D                          |                     | )N                                    |  |  |
| I hereby certify that the rules and re   | gulations of the           | Oil Conso                          | rvation     |                 |   |                           |               | ATIONE                           | . , , , , , , , , , | -                                     |  |  |
| I hereby certify that the rules and regulations of the Oil Conservation<br>Division have been complied with and that the information given above |                            |                                    |             |                 |   | 77-19-90 JUL 19 1990      |               |                                  |                     |                                       |  |  |
| is true and complete to the best of r  | ny knowledge a             | ind belief.                        |             |                 | Date  | e Approve                 |               | JUL 1                            | · 1330              |                                       |  |  |
| 11/00/   | 1-11                       |                                    |             |                 |   |                           |               |                                  | 1                   | /                                     |  |  |
| 4ch C. Costs   | 14                         |                                    |             | <del></del>     | ∥ By_   |                           | -8            | <u> </u>                         | Thereof             |                                       |  |  |
| Signature John C. Corbett Vice President-Exploration   |                            |                                    |             |                 | SUPERVISOR DISTRICT #3  |                           |               |                                  |                     |                                       |  |  |
| Printed Name   | (505)                      | 326-33                             | Title<br>25 |                 | Title   |                           |               |                                  |                     |                                       |  |  |
| 6/26/10  | /                          | Tel                                | ephone 1    | <del>1</del> 0. |   |                           |               |                                  |                     |                                       |  |  |

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.

