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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

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

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

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION

L	T	O TRAN	SPC	ORT OIL	AND NA	TURAL GA	S Wall	API No.			
Operator S. Pare	Production Co.					• 1			-045-27690		
Giant Exploration & Production Co. 30-045-27690											
P.O. Box 2810, Farmingt	ton, N.	4. 874	99								
Reason(s) for Filing (Check proper box)					Otho	r (Please expla	in)			Ī	
cw Well Change in Transporter of:											
Recompletion \square Change in Operator	Casinghead		condens								
f change of operator give name					-						
and address of previous operator					······································						
II. DESCRIPTION OF WELL A	a Formation	P. Formation X			L	case No.					
Buena Suerte 13A Com	Well No. Pool Name, Including				tland Co	al	State,	State, Federal or Fee Federal		<u>-14-20-36</u> 12	
Location											
Unit LetterA	: 790 Feet From The Nor							ect From The .	East	Line	
Section 13 Township 25N Range 11W , NMPM, San Juan County											
III. DESIGNATION OF TRANS	SPORTER	OF OIL	AN	D NATU	RAL GAS					,	
Name of Authorized Transporter of Oil or Condensate Address (Give adaress to which approved copy of the James of Authorized Transporter of Oil											
El Paso Natural Gas Co.					Address (Give address to which approved copy of this form is to be sent) P.O. Box 4990, Farmington, N.M. 87499						
If well produces oil or liquids,	Unit Sec. Twp. Rgc.				Is gas actually connected? When No			n ?			
If this production is commingled with that f	rom any othe	r lease or po	χοί, giv	c commingl	ing order num	ber:					
IV. COMPLETION DATA		Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion -		<u> </u>		<u>X</u>	Total Depth	<u> </u>	J	P.B.T.D.	1		
Date Spudded 4-9-90	6-28-90				1650 ' Top Oil/Gas Pay			1605.14'			
Elevations (DF, RKB, RT, GR, etc.) 6482 GLE	Name of Producing Formation Fruitland Basal Coal					1455'			Tubing Depth 1449 t Depth Casing Shoe		
Perforations 1455¹ - 1466¹											
	TUBING, CASING AND				CEMENTING RECORD			SACKS CEMENT			
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET 126.5'			60 sks.			
8-3/4"	4-1/2"				1649.29'			190 sks.			
6-1/4"	1-1/2"				1449'						
					<u> </u>						
V. TEST DATA AND REQUES OIL WELL (Test must be ofter re	T FOR A	LLOWA	BLE	all and much	he equal to o	e exceed top all	owable for ti	is depth or be	for full 24 hor	urs.)	
OIL WELL (Test must be after red) Date First New Oil Run To Tank	Date of Tes	al volume o	ioaa i	ou ana musi	Producing M	icthod (Flow, p	ump, gas lift.	eic.)			
	Date of Tex					3. 7 76	ir i i r	Cheke Size			
Length of Test	Tubing Fressure					Casing Property Control of the Contr			Gas MCF		
Actual Prod. During Test	Oil - Bbls.				Water - Light		5 199 0	200 %	<u> </u>		
GAS WELL		. —				au.c.	<u> </u>	Gravity of	Condensale		
Actual Prod. Test - MCF/D	Trengar or rest				Bbls. Conde	Bbla. Condemnate MING 5 6.1			COHOCE		
5	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
Testing Method (pitot, back pr.)	3 psi					3 psi			1/8"		
VI. OPERATOR CERTIFIC	ATE OF	COMP	LIAI	NCE		OIL CO	NSER\	VATION	DIVISI	ON	
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.						Date Approved SEP 17 1990					
							5U				
Signature John C. Corbett Vice President-Exploration					By_	ByORIGINAL SIGNED BY ERNIE BUSCH DEPUTY OIL & GAS INSPECTOR, DIST. #3					
Printed Name (505) 326-3325					Title	DEF	8 JHO YTUS	GAS INSPE	CICAL DIST	・ 接~	
Date 3 1850			phone				anti il a mila a c				

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.