Submit 5 Copies
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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.	Ţ	<u>O TRA</u>	NSP	ORT OIL	AND NA	TURAL GA		DI No				
Operator Hixon Development Company						Well API No. · 30-045-				27871		
Address P.O. Box 2810, Farmin	gton, N	ew Me	xico	87499								
Reason(s) for Filing (Check proper box) Change in Transporter of: Recompletion Claim Condensate Change in Operator Condensate Condensate Change in Operator Condensate Condensate												
If change of operator give name												
and address of previous operator		~~~								•		
II. DESCRIPTION OF WELL A Lease Name East Bisti Coal 6		Well No.			tland Coal State,			of Lease Federal or Fee SF 078062-A				
Location Unit Letter A : 830 Feet From The North Line and 1300 Feet From The East Line												
Section 6 Township 25N Range 11W , NMPM, San Juan County												
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS												
Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)												
Name of Authorized Transporter of Casinghead Gas or Dry Gas X Hixon Development Company					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 Sec. Twp. Rge. Is gas actually connected? When?											
If this production is commingled with that f IV. COMPLETION DATA	rom any othe								la n.i	big p		
Designate Type of Completion -		Oil Well	i_	Gas Well X	New Well	Workover	Deepen	ļ	Same Res'v	Diff Res'v		
Date Spudded 5-16-90	Date Compl. Ready to Prod. 6-5-90				Total Depth 1325'			P.B.T.D. 1294.94				
Elevations (DF, RKB, RT, GR, etc.) 6301 GLE	Name of Producing Formation Fruitland Basal Coal				Top Oil/Gas Pay 1228 '			Tubing Depth 1217.21'				
Perforations Depth Casing Shoe												
1228' - 1252' TUBING, CASING AND CEMENTING RECORD												
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT				
8-3/4"	7"			127.22'			60 sks.					
6-1/4"		4-1/2"			1323.60'			155 sks.				
	1-1/2"				1217.21							
V. TEST DATA AND REQUES	T FOR A	LLOWA	ABLE		<u> </u>				for 6:11 24 hour			
OIL WELL (Test must be after re Date First New Oil Run To Tank	be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lift, etc.)											
Length of Test	Tubing Pressure				Casing Pressure			onok Siz				
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.		UN2 5 1	Gas- MCF				
GAS WELL ON CON. DIV.												
Actual Prod. Test - MCF/D	Length of Test					Bbls. Condensate/MMCF Gravity of Condensate						
116	24 hours				Casing Press	sen /Shut in)		Choke Size				
Tosting Method (pitot, back pr.)	Tubing Pressure (Shut-in) 4 psi					psi						
VI. OPERATOR CERTIFICATE OF COMPLIANCE						OIL CONSERVATION DIVISION						
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					JUL 1 8 1990							
is true and complete to the best of my knowledge and belief.						Date Approved						
Signature Programme					SUPERVISOR DISTRICT /3							
Aldrich L. Kuchera President Printed Name MAN Title June 22, 1990 (505) 326-3325								SUR DI	SIRICT	7 3		
Date 22, 1990			phone l									

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.