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 at Bottom of Page

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.		RANSPORT OI							
Operator					API No.)-045-28141				
Address	7-2-1-1			· · · · · · · · · · · · · · · · · · ·	30	J-045-281	41	, <u>.</u>	
P. O. Box 2810,	<u> </u>	1 8/499							
Reason(s) for Filing (Check proper box	•		Oth	er (Please expla	in)				
Recompletion	Oil Change	in Transporter of:							
Change in Operator	Casinghead Gas	Dry Gas Condensate							
change of operator give name	Casingnead Gas [Condensate							
nd address of previous operator	7-11				·····				
I. DESCRIPTION OF WELL Lease Name	LL AND LEASE Well No	o. Pool Name, Includ	ling Formation		Kind	of Lease	1	case No.	
Bisti Coal 18	2					Federal or Fee		25446	
Location Unit Letter L	. 1600	Feet From The	South Time	and 790) -	et From The	West	7.	
Section 18 Town	nship 25N	Range 12W		, aud	Juan	et From The		Li1	
				virwi, Jai	Juan			County	
II. DESIGNATION OF TR. Name of Authorized Transporter of Oi	ANSPORTER OF or Conc			a address 45b	·	copy of this for		-3	
			Addiess (Off	e acceress to wa	ich approved	copy of this fort	n is io de se	ini)	
Name of Authorized Transporter of Ca		or Dry Gas X				copy of this form		ent)	
Giant Exploration						ngton, NM	87499		
if well produces oil or liquids, ive location of tanks.	Unit Sec.	Twp. Rge.		y connected?	When	?			
			No						
this production is commingled with to V. COMPLETION DATA	nat from any other lease	or pool, give comming	gling order num	Der:					
	Oil W	eil Gas Well	New Well	Workover	Deepen	Plug Back S	ma Dac'u	Diff Per	
Designate Type of Completic	on - (X)	X	1 X	I WOLKOVEL	l Deeben	i ring back is:	ame Kes v	Diff Res'	
Pate Spudded	Date Compl. Ready		Total Depth		<u> </u>	P.B.T.D.		J	
8-31-90	7-10-91		1500'			1464.54'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing		Top Oil/Gas Pay			Tubing Depth			
6465' GLE	Basal Fru	itland Coal	1 1340'		1325'				
Perforations 1340 * -1353 *						Depth Casing	Shoe		
	TUBING	TUBING, CASING AND			CEMENTING RECORD				
HOLE SIZE		TUBING SIZE	DEPTH SET			SACKS CEMENT			
8-3/4"	7''		131.2	241		60 sks.			
6-1/4"		1/2"	1499.	L9'		165 sks.			
	1-1	1/2"	1325'						
. TEST DATA AND REQU	JEST FOR ALLOY	VARLE					·		
	er recovery of total volun		t be equal to or	exceed top allo	wable for thi	STONE OF THE	full 24 % of	ian 🗇 🖟	
Date First New Oil Run To Tank	Date of Test			thod (Flow, pu				V L	
ength of Test	Tubing Pressure		Casing Pressu			Choka Signal Q A 1000			
_						Choke Size N 2 6 1992			
Actual Prod. During Test	Oil - Bbls.	Water - Bbis.		ois.		EMECON. DIV.			
GAS WELL			-1.			'	n ≤1. 3	· · · · · · · · · · · · · · · · · · ·	
Actual Prod. Test - MCF/D	Length of Test		Bbis. Conden	sate/MMCF		Gravity of Con	densate		
220		24 hrs.		0			N/A		
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)			Choke Size			
Back Pressure	155	····	155	5		3/4"			
I. OPERATOR CERTIF	ICATE OF COM	IPLIANCE			OED.	ATION	NUCLO		
I hereby certify that the rules and re	egulations of the Oil Cons	servation		JIL CON	DEKV.	ATION D	11121	אוע	
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 JUL - 7 1992					
a and and complete to the best of t	my knowkouge and belief.	,	Date	Approve	<u>ال</u> ا	<u> </u>	<u> </u>		
41	C. 1 +		• •		CUANIFE				
Signature .	www.		By Original Signed by CHARLES GROESON						
John C. Corbett	Vice Pr	cesident		ga garibaa saaba a					
Printed Name 6/23/97	(505)	Title 326-3325	Title	ENERGITY O	W. 6. GAS	Natification 1	<u>.3 . #3 .</u>		
Date		elephone No.							

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.