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Appropriate District Office
DISTRICT 1
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., Aziec, NM 87410

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

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

<b>.</b>	IOINA	NSPUH I UIL	AND NA	IUNALU	45				
Decrator				Well API No.					
Giant Exploration & Production Company				30-			045-28561		
Address P.O. Box 2810, Fari		87499			*** <u>*</u> ********************************				
Reason(s) for Filing (Check proper bo.	-	Tongerant	Oth	ct (Please expl	ain)				
New Well  Recompletion		Transporter of:  Dry Gas							
Recompletion	Casinghead Gas	Condensate							
If change of operator give name and address of previous operator			· · · · · · · · ·	<del> </del>					
II. DESCRIPTION OF WEL	L AND LEASE		****						
Lease Name Well No. Pool Name, Including			-			d of Lease Lease No.			
						deral or Fee NM 51013			
Location Unit LetterB	790	Feet From The N	orth Lin	c and18.	50 Fo	ct From The	East '	Linc	
Section 28 Town	Section 28 Township 25N Range 12			l , <sub>NMPM.</sub> San Jua			n County		
				***************************************				Сосия	
III. DESIGNATION OF TR Name of Authorized Transporter of O		<del></del>		e addesse to	hich ann '	conv of this fa-	ie in he -	ntl	
	il or Conden		AUGUESE (GIV	e auarcss to w	men approved	copy of this form	10 DC SC	/w/	
Name of Authorized Transporter of C Giant Exploration 8		or Dry Gas XX				copy of this form		nt)	
			<del></del>		<del></del> , <del></del>		87499		
If well produces oil or liquids, Unit Sec. Twp.			No When						
If this production is commingled with IV. COMPLETION DATA	that from any other lease or	pool, give commingl	<del></del>	ber:					
	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back   Sa	me Res'v	Dist Res'v	
Designate Type of Complete		<u> </u>	X	1		<u> l_</u>		<u> </u>	
Date Spuddo	Date Compl. Ready to	Prod.	Total Depth			P.B.T.D.			
11-2-91	1-14-92		1230 Top Oil/Gas Pay			1184.91'			
Elevations (DF, RKB, RT, GR, etc.)	rations (DF, RKB, RT, GR, etc.)  Name of Producing Formation  Basal Fruitland Coal			1060'			Tubing Depth		
Perforations Basal Fruittand Coal				JU .		Depth Casing Shoe			
1060'-1078'							<del></del>		
TUBING, CASING AND									
HOLE SIZE			DEPTH SET			SACKS CEMENT			
8-3/4"			162.8'			75 sks.			
6-1/4"		4-1/2"		1229.61'			140 sks.		
	1-1/2	2''	1081			<del> </del>			
V. TEST DATA AND REQU									
	ter recovery of total volume	of load oil and must					ші 24 һәш	27 - 32 1	
Date First New Oil Run To Tank	Date of Test	Date of Test		Producing Method (Flow, pump, gas lift, as					
Length of Test	Tubing Pressure	Tubing Pressure		Casing Pressure			Children JAN2 2 1332		
Actual Prod. During Test	Oil - Bbls.	Oil - Bbls.		Water - Bbls.		Gas-MOSIL CON. DIV			
GAS WELL						L`	<del>-DIST</del> i	<del>. 3</del>	
Actual Prod. Test - MCF/D	Length of Test		Bbls. Conder	sate/MMCI:		Gravity of Con-	Jensaie		
401	24 hrs.	24 hrs.		0		N/A			
Testing Method (pilot, back pr.)	Tubing Pressure (Shu	l-in)	Casing Press	ure (Shut-in)		Choke Size			
Back Pressure	160 psi		160	psi		3/4"			
VI. OPERATOR CERTIF	FICATE OF COM	PLIANCE			VICEDY.	ATIONID	ווופור	\NI	
I hereby certify that the rules and i			1		NO EU A	ATION D	10101	N N	
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			Date	Date Approved JAN 2.4 1992				2	
1.10				, , , pp, 0 v	· · · · · · · · · · · · · · · · · · ·				
Sizione C	. colul	<del></del>	By_	C	iginal Sibae	d by Frank I	. CHAVE	·	
Signature John C. Corbett Vice President									
Printed Name  Title  (505) 326-3325			Title	. 5					
120/9d				·= <del>-</del>					
Date /	Tcle	ephone No.		Control of the Control of the Control	William Star Street Co.	Harris 10 Minutes of	grand on the states	na si na kana da sa	

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.