

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

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

Operator Redwolf Production, Inc.	Well API No. 30-045-28906
Address P. O. Box 5382 Farmington, NM 87499	
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)	
New Well <input checked="" type="checkbox"/>	Change in Transporter of:
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>
If change of operator give name and address of previous operator	

RECEIVED  
MAR 2 1993  
OIL CON. DIV  
DIST. 3

II. DESCRIPTION OF WELL AND LEASE

Lease Name E. L.	Well No. #1	Pool Name, Including Formation Bisti Lower Gallup	Kind of Lease State, Federal or Prop	Lease No. NM NM 89128
Location Unit Letter D : 929' Feet From The North Line and 867' Feet From The West Line Section 31 Township 25N Range 11W, NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Gary-Williams Energy Corp.	Address (Give address to which approved copy of this form is to be sent) 89 Road 4990 Bloomfield, NM 87413					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Giant Exploration and Production Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2810 Farmington, NM 87499					
If well produces oil or liquids, give location of tanks.	Unit D	Sec. 31	Twp. 25N	Rge. 11W	Is gas actually connected? No	When? As soon as permitted

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well <input checked="" type="checkbox"/>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 1/27/93	Date Compl. Ready to Prod. 2/25/93		Total Depth 4970'		P.B.T.D. 4924'			
Elevations (DF, RKB, RT, GR, etc.) 6414' GR	Name of Producing Formation Bisti Lower Gallup		Top Oil/Gas Pay 4756'		Tubing Depth 4856'			
Perforations 4756' - 4766'					Depth Casing Shoe 4970'			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4"	8 5/8"	229'	150
7 7/8"	4 1/2"	4970'	650
	2 3/8"	4856'	

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)			
Date First New Oil Run To Tank 2/25/93	Date of Test 2/25/93	Producing Method (Flow, pump, gas lift, etc.) Pumping	
Length of Test 12 hrs	Tubing Pressure 30	Casing Pressure 30	Choke Size
Actual Prod. During Test	Oil - Bbls. 31	Water - Bbls. 23 (load)	Gas - MCF 45

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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.

Bruce E. Delventhal  
Signature  
Bruce E. Delventhal, Engineer  
Printed Name  
2/26/93 (505) 326-4125  
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved MAR 2 1993  
By Bruce E. Delventhal  
Title SUPERVISOR DISTRICT #3

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- All sections of this form must be filled out for allowable on new and recompleted wells.
- Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- Separate Form C-104 must be filed for each pool in multiply completed wells.