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Appropriate District Office  
DISTRICT I  
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DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

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

State of New Mexico  
Energy, Minerals and Natural Resources Department

## OIL CONSERVATION DIVISION

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

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

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

Operator <b>Giant Exploration &amp; Production</b>		Well API No. <b>30-045-28879</b>
Address <b>P.O. Box 2810, Farmington, NM 87499</b>		
Reason(s) for Filing (Check proper box)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	Other (Please explain) <input type="checkbox"/>
Recompletion <input type="checkbox"/>		
Change in Operator <input type="checkbox"/>		
If change of operator give name and address of previous operator _____		

### II. DESCRIPTION OF WELL AND LEASE

Lease Name <b>Buena Suerte 33L Com</b>	Well No. <b>1</b>	Pool Name, Including Formation <b>Basin Fruitland Coal</b>	Kind of Lease State, Federal or Fee	Lease No. <b>N00-C-14-20-3621</b>
Location Unit Letter <b>L</b> : <b>1805'</b> Feet From The <b>South</b> Line and <b>790'</b> Feet From The <b>West</b> Line Section <b>33</b> Township <b>26N</b> Range <b>11W</b> , NMPM, San Juan County				

### III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/> <b>Water Pool # 2805356</b>	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/> <b>Giant Exploration &amp; Production 2805355</b>	Address (Give address to which approved copy of this form is to be sent) <b>P.O. Box 2810, Farmington, NM 87499</b>					
If well produces oil or liquids, give location of tanks.	Unit	Soc.	Twp.	Rgc.	Is gas actually connected?	When?
					No	
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	Gas Well	New Well	Workover	Deen	Back	Same Res'v	Diff Res'v
Date Spudded <b>12-15-92</b>	Date Compl. Ready to Prod. <b>N/A 1-14-93</b>	Total Depth <b>1385'</b>						
Elevations (DF, RKB, RT, GR, etc.) <b>6233' GLE</b>	Name of Producing Formation <b>Basin Fruitland Coal</b>	Top Oil/Gas Pay <b>1240'</b>						
Perforations <b>1240' - 1262'</b>								
TUBING, CASING AND CEMENTING RE								
HOLE SIZE	CASING & TUBING SIZE	DEPTH						
<b>8-3/4"</b>	<b>7"</b>	<b>126.65'</b>						
<b>6-1/4"</b>	<b>4-1/2"</b>	<b>1374.12'</b>						
	<b>2-1/16"</b>	<b>1247'</b>						
			Cement <b>2.47</b> Depth g Shoe Cement bit "A" Submit "A"					

### V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift) <b>Flow</b>	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	
<b>RECEIVED JUL 2 1993 OIL CON. DIV. DIST. 3</b>			

### GAS WELL

Actual Prod. Test - MCF/D <b>N/A</b>	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in) <b>170 psi</b>	Casing Pressure (Shut-in) <b>170 psi</b>	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.

Signature **Jeffrey R. Vaughan** V.P., Operations  
Printed Name  
Date **JUL 2 1993** Title **(505) 326-3325**  
Telephone No.

### OIL CONSERVATION DIVISION

Date Approved **OCT 18 1993**

By **Original Signed by CHARLES GHOLSON**

Title **DEPUTY OIL & GAS INSPECTOR, DIST. #3**

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 changes of operator, well name or number, transporter, or other such changes.

BUENA SUERTE 33L COM WELL NO. 1  
1805' FSL, 790' FWL  
SECTION 33, TOWNSHIP 26 NORTH, RANGE 11 WEST  
LEASE NO. NOO-C-14-20-3621  
SAN JUAN COUNTY  
NEW MEXICO  
COMPLETION REPORT  
EXHIBIT "A"

CEMENT RECORD

Surface Casing	-	Mixed and pumped 60 sks. (70.8 cu.ft.) of Class "B" cement containing 2% $\text{CaCl}_2$ and 1/4#/sk. cellophane flakes. Cement circulated to surface.
Production Casing	-	Mixed and pumped 85 sks. (175.1 cu.ft.) Class "B" cement containing 2% Thriftyment and 1/4#/sk. cellophane flakes. Tailed in with 80 sks. (94.4 cu.ft.) of Class "B" cement containing 2% $\text{CaCl}_2$ and 1/4#/sk. cellophane flakes. Cement circulated to surface.