

State of New Mexico Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION PISTRICE II P.O. Drawer DD, Anesia, NM 88210

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

1.	REQUEST FO TO TRA	OR ALLOWA NSPORT O						
Amax Oil & Gas				<u> </u>	Well API No. 300450725200S1			
P.O. Box 42806	, Houston, T	X 77042						
Reason(s) for Filing (Check proper box) New Well [] Recompletion [] Change in Operator [] I change of operator give name	Oil Casinghead Gas	Transporter of: Dry Gas Condensate		(Please explo				
nd address of previous operator Lade	d Petroleum	Corp., 3	70 17th	St.,St	e. 170	0,Denver	·,co 8	<u> 10202 - 56</u>
I. DESCRIPTION OF WELL Lease Name Kutz Canyon				nd of Lease Lease No. te tederal or Fee SF07738				
ocation Unit LetterM	790	Feet From The S	outh line	790	\\\\\\\	et From The	vest	
Section 23 Townshi	201	Range 13W	10 , NMI		San Ju			Line County
II. DESIGNATION OF TRAN	SPORTER OF OH	L AND NATU	RAL GAS	·•				•
County Mid I I immo Francisco	or Condens	ale [X]				copy of this form		
Gary Williams Energy Corp. Name of Authorized Transporter of Casinghead Gas or Dry Gas (X)			370 17th St., Ste. 5300, Denver, CO 80202 Address (Give address to which approved copy of this form is to be sent)					
Southern Union Gathering Junters GAS			P.O. Box 26400, Albuquerque, NM 87125					
f well produces oil or liquids, ve location of tanks.	Unit Sec.		is gas actually o		When			
this production is commingled with that V. COMPLETION DATA	1			:		ctober,	1930	
Designate Type of Completion	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back Sa	me Res'v	Diff Res'v
ate Spaidded	Date Compl. Ready to I	'n.d.	Total Depth	l]	P.B.T.D.		J
evations (DF, RKB, RT, GR, etc.)	OF, RKB, RT, GR, etc.) Name of Producing Formation			,	<u> </u>	Tubing Depth		
rforations	1					Depth Casing S	hoe	
	TUDING	TA CINICI AND	/351 451 Hans 1					
HOLE SIZE	CASING & TUE	CASING AND		I RECORL EPTH SET)	SAC	CKS CEME	NT
			<u>-</u>			- OAC	NO OCINIC	
							·	
. TEST DATA AND REQUES	T FOR ALLOWA	BLE						
	ecovery of total volume of		be equal to or ex	ceed top allo	wable for this	depth or be for J	ull 24 hour	s.)
ne first new Oil Run 10 (ank	Date of Test		Producing Method	od (Flow, pun	np, gas iyi, et	c.)		·
ength of Test	Tubing Pressure		Casing Pressure		(O	W.C.C.E IVE		
tual Prod. During Test	Oil - Bbls.		Water - Bbis.			GAUGI 2 1991		
AS WELL			·			IL CON	. DIV	<i>7</i> .
tual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF			Gravity D Stude Bate			
sting Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)			Choke Size		
I. OPERATOR CERTIFICA	ATE OF COMPL	IANCE						
I hereby certify that the rules and regula Division have been complied with and J	tions of the Oil Conservat	ion		L CON	SERVA	TION DI	VISIO	N
is true and complete to the best of my k	nowledge and belief.	acove			Δ	UG 1 2 19	91	
Sherry las	k		Date A	pproved	<u>-</u>			
Signature Sherry Vasek Prod. Analyst			By But Chang					
Frinted Name 6/21/91		itle	Title_		SUPERI	ISOR DIST	RICT !	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 each pool in multiply completed wells.