State of New Mexico

Energy, Minerals and Natural Resources Department

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

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

OIL CONSERVATION DIVISION

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

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION

	T	O TRA	NSP	ORT OIL	AND NAT	URAL GA	S				
perator								Well API No. 30-045-2121100			
BRECK OPERATING CORPORATION								30-043-2121100			
Address c/o Walsh Engr. &			Me	i.a. 97	401						
	rmingto	n, Ne	W ME	exico 87	Othe	r (Please expla	in)				
Reason(s) for Filing (Check proper box)	(hange in	Transpo	orter of:		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•				
New Well Recompletion	Oil		Dry G	1 1							
Change in Operator	Casinghead	_	Conde								
change of operator give name											
nd address of previous operator											
I. DESCRIPTION OF WELL A	ND LEA	SE	, —.				12: 1	61	1.	age No	
Lease Name	1			lame, Includin	Continuou			d of Lease Lease No. SF-077383			
Kutz Government									- - -		
Location Unit LetterN	930	930 Feet From The South Line and 1720							West	Line	
Section 21 Township		28N	Range	105		ирм,	San Ju	an		County	
III. DESIGNATION OF TRANS	SPORTER	OF O	IL AN	ND NATUI	Address (Giv	e address to wh	uch approved	copy of this fo	rm is to be se	ent)	
Name of Authorized Transporter of Oil		or Conde	Sale		Address (Orr	E GLILLY ELS TO WY	aca approved	30 p) 9))-			
Name of Authorized Transcourter of Casing	head Gas		or Dr	Gas XX	Address (Giv	e address to wh	hich approved	copy of this fo	rm is to be se	ent)	
Warme of Authorized Transporter of Casinghead Gas or Dry Gas XX Sunterra Gas Gathering Company						P.O. Box 26400 Albuquerque, N.M. 87125					
If well produces oil or liquids,						y connected?	When	?			
give location of tanks.	<u>i </u>		1	_1		Yes					
If this production is commingled with that f	rom any other	r lease or	pool, g	ive commingli	ng order num	ber:					
IV. COMPLETION DATA						· · · · · ·	1 5	Plug Back	Sama Backy	Diff Res'v	
Designate Type of Completion	. (X)	Oil Wel	1	Gas Well X	New Well	Workover	Deepen	Plug Back 	Same Kes v	Dill Resv	
	Date Comp	Ready I	o Prod		Total Depth	L	<u> </u>	P.B.T.D.			
Date Spudded 4/18/73		/15/9				2250' 9	201		073 '		
Elevations (DF, RKB, RT, GR, etc.)	Name of Pr			×a	Top Oil/Gas		<u>~</u>	Tubing Dept			
6034'GL	Basin Fruitland Coal				1940'			2032'			
Perforations								Depth Casin			
1940'-2068'						VO DECOL	<u> </u>	1 2.	211'		
	TUBING, CASING AND				DEPTH SET			SACKS CEMENT			
HOLE SIZE	CASING & TUBING SIZE 8-5/8"				108'			125			
12-1/4"	4-1/2"			2211'			375				
7-7/8"	4-1/2										
	1-	1/2"			2032	2'					
V. TEST DATA AND REQUES	T FOR A	LLOW	ABL	E .							
OIL WELL (Test must be after r	ecovery of 10	ial volum	e of loa	d oil and must	be equal to o	r exceed top al	lowable for th	S 0	The second	***	
Date First New Oil Run To Tank Date of Test						Producing Method (Flow, pump, gas lift, et					
	The Control of the Co			Casing Pressure			hade Size		دا د.		
Length of Test	Tubing Pressure				Casing Fressure			JUL 2 4 1992			
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			"OIL CON. DIV.			
GAS WELL									DIST.	3	
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate			
N/A - Capable of	producing commercial qu				antities of Gas.						
Testing Method (pitot, back pr.)	Tubing Pro	275	ut-in)		Casing Pres	sure (Shut-in) 275		Choke Size			
VI. OPERATOR CERTIFIC	ATE OF	COM	PLIA	NCE		011 00	NOTE:	/ATION	חוייייי	ON!	
I hereby certify that the rules and regulations of the Oil Conservation						OIL CONSERVATION DIVISION					
Division have been complied with and that the information given above						Data Approved AUG 0.5 1992					
is true and complete to the best of my	Dat	e Approv	ed	00 00	1004						
FOR: BRECK OPERATING CORPORATION											
faul Thompson						By ORIGINAL SIGNED BY ERNIE BUSCH					
Signature Paul C. Thompson, P.E. Agent							au a a	MADECTAR	מי דוות		
Printed Name		505	Tide	4892	Title	e <u>CEPUTY</u>	UIL & GAS	THIST CLICK	, viat. #2		
7/23/92											
Date			elephon	e 170.						<u>-</u>	

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.