Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of Iven Inches Energy, Minerals and Natural Resources Department

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

DISTRICT II
P.O. Drawer DD, Antesia, NM \$8210

## OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

Operator		1011	IANSI	PORTO	IL AND N	ATURAL (	GAS				
D.J. SIMMON	SIMMONS								API No.		
Address				0-045-28089							
P.O. BOX 146	69, FA	RMING'	TON,	NEW I							
Reason(s) for Filing (Check proper box) New Well	,	<b>A</b>	·- <del>-</del>			ther (Please ex	plain)				
Recompletion	0:1	Change			***						
Change is Operator	Oil Carlant		Dry 0								
If change of operator give name	Casagn	end Cas	Conde	3488.01	` ;			·			
and address of previous operator											
II. DESCRIPTION OF WELL	L AND LE	EASE				1. 					
Lease Name		Well No	. Pool 1	lame, lociu	ding Formation	<u> </u>	Kin	d of Lease	<del></del>	Lease No.	
NOE COM 27		#2				ND COAI	Stat	e, Federal or Fe		077383	
Location		-								777303	
Unit LetterM	:1	046	_ Feet F	rom The _	<u>s</u> u	se and $\frac{1}{2}$	290	Feet From The	W	. I loo	
Section 27 Towns	hip 281	J		1.05	•					Line	
C	nip ZOI	<u> </u>	Range	10W		MPM,	SAN JU	AN		County	
III. DESIGNATION OF TRAI	NSPORTI	ER OF O	H. AN	ID NATI	IDAL CAS	,					
III. DESIGNATION OF TRANSPORTER OF OIL AND NAT Name of Authorized Transporter of Oil X or Condensate					Address (Give address to which approved copy of this form is to be sent)						
GARY ENERGY CORPORATION					115 INVERNESS DR.E. ENGLEWOOD. CO. 80112						
Name of Authorized Transporter of Casinghead Gas or Dry Gas GAS COMPANY OF NEW MEXICO					Address (Give address to which approved copy of this form is to be sent)					<u>J.80112</u>	
Well produces oil or liquids,		,	·		P.O.BOX 26400, ALBU			QUEROUE	.NM 87	125	
give location of tanks.	Unit I M	Sec. 27	Twp.	Rge.	Is gas actually connected? When						
f this production is commingled with the			28N	110W	NC	<u> </u>		ASAP			
f this production is commingled with that V. COMPLETION DATA	nom any ou	Set leafer OL	boor' Bra	e comming	ling order num	ber:		<del></del>			
		Oil Well		las Well	New Well	1 100	- <del></del>	·			
Designate Type of Completion		i	i	X	I X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Com	pl. Ready to			Total Depth	L	<del></del>	P.B.T.D.		<u>.l</u>	
8-17-90 Elevations (DF, RKB, RT, GR, etc.)	9-20-90			1992'			7.8.1.5.	1981	1		
5901' GL	Name of Producing Formation FRUITLAND				Top Oll/Cas Pay			Tubing Dept	<u> </u>		
Perforations TROTTLAND					1754'			1882'			
1754-68, 1784-96, 1806-08, 1870-92 W/4					SPF '			Depth Casing			
						NG RECOR	<u> </u>		1992	· ·	
HOLE SIZE	CA	SING & TU	BING S	ZE	CLIVILIA	DEPTH SET		T		·	
12-1/4"	8-	-5/8"	- 24	1.0#		225'	<del></del>		ACKS CEM	ENT	
7-7/8"	- <del> </del>						<del></del>	<del></del>	140	<del></del>	
7-778			- 10			1992		<del> </del>	407	<del></del>	
TEST DATA AND REQUES	T FOD A	3/8"	- 4.7	#		1882			(0)	<del>"</del>	
IL WELL (Test must be after re	teovers of to		RRFE					***** <u>****</u>		<del></del>	
IL WELL (Test must be after red) Jule First New Oil Run To Tank	Date of Tes	1	7 100a ot	ana musi	Producing Ma	exceed top allo	wable for thi	depih or be fo	r full 24 hour	3.)	
					r rouncing trie	thod (Flow, pu	mp, gas lift, d	(c.)	1 2 4	YEN	
ength of Test	Tubing Pres	anne	13	5 15	Called Freeze	no Financia		Chie	<u> </u>	UE	
ctual Prod. During Test		<del></del>	4 17 7	in 9	• 0 C 2≥				U1 4 13.		
	Oil - Bbls.				Water - Bbls.		· · · · · · · · · · · · · · · · · · ·	OM- WCL	<u> </u>	30	
AS WELL				JLO3	9 1990			OIL	CON.	DIV.	
ctual Prod. Test - MCF/D	Length of T	<del></del>	O		N. DM				DIST. 3	<del></del>	
	Central Of 1	48	_	OIS	Bbis, Condens	W/MMCF		Gravity of Cor	-		
sling Method (pilot, back pr.)	Tubing Pres	aure (Shut-i	-					·		•	
BACK PRESS.	189				Casing Pressure (Shut-in) 191			Choke Size			
I. OPERATOR CERTIFICATION CONTROL OF THE PROPERTY CONTROL OF THE PROPERTY OF T	ATE OF	COMPI	IANI	70		171					
				ا ع-		II CON	SEDVA	TION			
					OIL CONSERVATION DIVISION						
is true and complete to the best of my knowledge and belief.					Date Approved FEB 0 8 1991						
Iland V to sa	,			İ	Date	Abblosed		10	<u> </u>		
Signature					D. Original Street L. Communication						
ROD PINKETT PETROLEUM ENGINEER					By Original Signed by FRANK T. LHAVEZ						
12-09 00 Title					<b></b>	CHRES					
Date (5	05) 32	6-375			1419_	SUPERVIS	SOR DIST	RICT#3			
		Teleph	none No.		•						
PA LOWER A											

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
- 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