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

Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION P.O. Box 2088

Revised 1-1-89 See Instructions at Bottom of Page

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

Santa Fe, New Mexico 87504-2088 DISTRICT III 1000 Rio Brizos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Openior Northwest Pipeline Co			_		Well AF	1 110.			
MOTUMEST LIBETING CO.	rnoration				30-	039-245	92		
Address	r por a c roit								
3539 East 30th Street	Farming	iton, NM 874							
leason(s) for Filing (Check proper box)			Other	(Please explair	1)				
lew Well	-	e in Transporter of:							
tecompletion · 🔲		Dry Gas					•		
hange in Operator	Casinghead Gas	Condensate							
change of operator give name ad address of previous operator									
	LND FEACE			•					
I. DESCRIPTION OF WELL A	Well 1	No. Pool Name, Includin	g Formation		Kind of			se No.	
Lease Name San Juan 29-6 Unit	#21			oal	Şişte, F	ederal og Reg	x SF-07	8426	
ocation		IL DUSTIN TO	1014114	<u>, y </u>					
N	. 1125	Feet From TheS	outh Line	and 171	.5 Fee	From The _	North	Line	
Unit Letter	. :	rea rion in							
Section 30 Township	29N	Range 6W	, NM	<u>рм, Ric</u>	<u>Arriba</u>			County	
II. DESIGNATION OF TRANS	SPORTER OF	FOIL AND NATUE	Address (Give	address to whi	ich approved	capy of this fo	rm is to be ser	u)	
Name of Authorized Transporter of Oil	Address (Cire	BOOK ESS TO WIN	en upproved	در س ره روه.		•			
	D. Oa Day Can 1977	Address (Give address to which approved copy of this form is to be sent)							
Name of Authorized Transporter of Casing		or Dry Gas 🔚	3539 E. 30th - Farmington, NM 87401						
Northwest Pipeline Co		Twp. Rge.	is gas actually		When	-	<u>, , , , , , , , , , , , , , , , , , , </u>		
If well produces oil or liquids, give location of tanks.	Unit Sec. 1 N 3(į				
If this production is commingled with that I			ing order numb	er:					
IV. COMPLETION DATA	Hour any outer load	at or local Breat accounting.							
17. COMPLETION DATA	Oil	Well Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion		i X	j X		<u> </u>			<u> </u>	
Date Spudded	Date Compl. Rea	ady to Prod.	Total Depth			P.B.T.D.			
12-12-89	2-	2-90	360	00' KB	<u> </u>	3590' KB			
Elevations (DF, RKB, RT, GR, etc.)	Name of Produci	ing Formation	Top Oil/Gas			Tubing Dep			
6700' KB 6687' GR				3351' KB			3534 KB Depth Casing Shoe		
Perforations						Depth Casi	ig Shoe		
3351'-3524'				VA PEGOD		<u> </u>			
				CEMENTING RECORD			CAOVE CEMENT		
LIOLE CIZE	CASING	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
HOLE SIZE			ļ)		
12-1/4"	9-	5/8"		539'		320			
	9- 5-	5/8" 1/2"		539' 3601'					
12-1/4"	9- 5-	5/8"		539'		320			
12-1/4" 7-7/8"	9- 5- 2-	5/8" 1/2" 7/8"		539' 3601'		320			
12-1/4" 7-7/8" V. TEST DATA AND REQUE	9- 5- 2- ST FOR ALL	5/8" 1/2" 7/8"	t be equal to o	539' 3601' 3534'		320 650)	us.)	
12-1/4" 7-7/8" V. TEST DATA AND REQUE OIL WELL (Test must be after	9- 5- 2- ST FOR ALL recovery of total w	5/8" 1/2" 7/8"	t be equal to o	539' 3601' 3534'	owable for th	320 650 s depth or be)	urs.)	
12-1/4" 7-7/8" V. TEST DATA AND REQUE	9- 5- 2- ST FOR ALL	5/8" 1/2" 7/8"	t be equal to o	539' 3601' 3534'	owable for th	320 650 s depth or be)	urs.)	
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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.