Submit 5 Copies
Appropriate District Office

State of New Mexico Energy, Minerals and Natural Resources Department

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

P.O. Box 1980, Hobbs, NM 88240 DISTRICT II
P.O. Drawer DD, Ariesia, 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

| I. | T(| <u>O TRA</u> | NSPOF | RT OI | <u>L AND NA</u> | TUF | RAL G | | | | | | | | |
|--|--|----------------------------|-----------------|------------|---------------------|------------------------|-------------------------|---|----------------------|-------------------|----------------------|----------------|--|--|--|
| Openior Opintana Detro | Quintana Petroleum Services, Inc. | | | | | | į | | | | | -045-28439 | | | |
| Address P. O. Box 3331 | | | | 53 | | | | · | 30- | -040-20 | 100 | | | | |
| Reason(s) for Filing (Check proper box) | | | | | <u></u> | (PI | | | | | | | | | |
| New Well | | hance in | Transporter | of: | | er (Fil | ase expl | (N | | | | | | | |
| Recompletion | Oil | | Dry Gas | | | | | | | | | | | | |
| Change in Operator | Casinghead (| _ | Condensate | | | | | | | | | | | | |
| If change of operator give name MC | Kenzie Me | | | | 011 Main | Su | ite : | 4 255 | Dπ | irango | Colo | 81301 | | | |
| and address of previous operator | RCHZIC MC | CHAIR | corp. | , 1 | main, | | 1100 7 | 7200, | | ii aligo, | W10. | | | | |
| II. DESCRIPTION OF WELL | AND LEAS | E | | | | | | | | | | | | | |
| Lease Name | | | Pool Name | , Includ | ing Formation | | | 1 1 | (ind | of Lease | | Lease No. | | | |
| Hughes 27 G | | 4 | Basi | n Fl | Coal | | | | | Federal or F | ∞ SF | -078049 | | | |
| Location | | | <u> </u> | | | | | <u>, , , , , , , , , , , , , , , , , , , </u> | | ******* | | | | | |
| Unit LetterG | . 141 | .5 | Feet From 1 | De N | | | 1580 |) | E. | et From The | \mathbf{E}^{\cdot} | • | | | |
| | | | | | | | | | | et riom the | | Line | | | |
| Section 27 Townsh | ip 29N | | Range 8W | 1 | , NN | APM, | San | Juan | l | | | County | | | |
| | | | | | | | | | | | | | | | |
| III. DESIGNATION OF TRAI | SPORTER | OF OI | L AND N | UTAN | | | | | | | | | | | |
| Name of Authorized Transporter of Oil | or or | Condens | - ate | 7 | Address (Give | odar | ess 10 wh | ich appr | oved | copy of this | form is to be | seni) | | | |
| | | | | | | | | | | | | | | | |
| Name of Authorized Transporter of Casis | Address (Give address to which approved copy of this form is | | | | | | | seni) | | | | | | | |
| <u>Fl Paso Natural Gas</u> | | | | | | | P. O. Box 4990, Farming | | | | | gton, NM 87401 | | | |
| If well produces oil or liquids, give location of tanks. | Unit Se | c | Twp | Rge | is gas actually | CODE | ected? | ۱۷ | Vhen | ? | | | | | |
| | | I | | | l No | | | L | | | | | | | |
| f this production is commungled with that | from any other I | ease or p | ool, give co | mming | ing order numb | er. | | | | | | | | | |
| V. COMPLETION DATA | ,- | | , | | . | | | | | | | | | | |
| Designate Type of Completion | - (X) | Xil Well | Crr / | ₩eШ | New Well | Worl | Kover | Deep | ea | Plug Back | Same Res'v | Diff Resiv | | | |
| Date Spudded | | | LX | <u> </u> | | | | <u> </u> | | | <u> </u> | | | | |
| 12-5-90 | Date Compl. F 6-10- | | Prod. | | Total Depth 3410 | | | | | P.B.T D. | 366 | | | | |
| Elevations (DF, RKB, RT, CR, atc.) | Name of Prods | | <u> </u> | | Į. | <u> </u> | | | | | | | | | |
| 6760 GR | Top Oil/Gas Pay 3181 | | | | | Tubing Depth 3298 | | | | | | | | | |
| erforations | 3101 | | | | | 1 | | | | | | | | | |
| 3181-89, 3259- | 36-40 | | | | | Depth Casing Shoe 3410 | | | | | | | | | |
| | | | | | | | | | | <u> </u> | 110 | | | | |
| HOLE SIZE | | CEMENTING RECORD | | | | | | | | | | | | | |
| 12-1/4 | CASING & TUBING SIZE | | | | DEPTH SET 255 | | | | | SACKS CEMENT | | | | | |
| 7-7/8 | | 8-5/8, 24# 4-1/2, 11.6# | | | | 3410 | | | | | 500 + 175 | | | | |
| N/A | | 2-3/8, 4.7# | | | | | · | | | | | None | | | |
| Z N/A | 2-3/6 | 3298 | | | | | Notice | | | | | | | | |
| . TEST DATA AND REQUE | T FOR ALL | .OWA | BLE | | 1 | | | | | L | <u> </u> | | | | |
| IL WELL (Test must be after t | | | | जे सम्बद्ध | be equal to or i | record | ion allo | unble fo | e shie | death on he | lan full 74 ha | | | | |
| Date First New Oil Run To Tank | Date of Test | | , | | Producing Met | | | | | | jor juu 24 No | <u> </u> | | | |
| | | | | | | ., | , , | · · | 7. , - | , | | | | | |
| ength of Test | Tubing Pressur | 3 | | | Casing Pressur | • | | | | Choke Size | | | | | |
| | | | | | _ | | | | į | | | 5 m 19 7 | | | |
| Actual Prod. During Test | Oil - Bbis. | | | | Water - Bbis | | | | \neg | Mer State Control | | | | | |
| | | | | | | | | | | 177 | | *** | | | |
| GAS WELL | | | | | | | | | | 00 | T1 A 10 | 02 | | | |
| Actual Prod. Test - MCF/D | League of Test | | | | Bbis. Condens | NA/NA | 400 | | | | | | | | |
| | | | | | | | *. | | | OILA | - Societies | Martin Comment | | | |
| esting Method (puot, back pr.) | Tubing Pressur | e (Shut-u | D) | | Casing Pressur | e (Shi | 4 →6) | ` | | Choice Size | er er i Carrier | · | | | |
| | | | | | | - (| , | | | | 14×10 | | | | |
| L OPERATOR CERTIFIC | ATE OF C | OME | LANCE | | | | | - | | · | | | | | |
| I hereby certify that the rules and regul | | | | • | |)II (| CON | SER | VΔ | MOIT | DIVISIO |)NI | | | |
| Division have been complied with and | OIL CONSERVATION DIVISION | | | | | | | | | | | | | | |
| is true and complete to the best of my | OCT 1 4 1993 | | | | | | | | | | | | | | |
| | Date | Date Approved | | | | | | | | | | | | | |
| The Car | | | | 7. | ٠ , | | | | | | | | | | |
| Signature | By Birt Chang | | | | | | | | | | | | | | |
| Steve Sandlin | SUPERVISOR DISTRICT /3 | | | | | | | | | | | | | | |
| Printed Name | Title | | | | | | | | | | | | | | |
| Date | (71 | | 51 <u>-8889</u> | | ' | | | | - | | | | | | |
| | | i elepi | hone No. | | ll . | | | | | | | | | | |

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.