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

State of New Mexico Energy, Minerals and Natural Resources Department

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

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

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III

000 Rio Brazos Rd., Aziec, NM 87410	REQ					AUTHOR				
Operator ANOCO PRODUCTION COMPANY						Well API No. 300452372700				
Address P.O. BOX 800, DENVER,	COLORA	DO 802	01	\ \\						
Reason(s) for Filing (Check proper box) New Well Recompletion Change in Operator Change of operator give name and address of previous operator	Oil Casinghe	_	Dry G		Ou	het (Please exp	olain)			
I. DESCRIPTION OF WELL	ANDIF	ASE								
Lease Name STATE GAS COM A		Well No.			ing Formation SAVERDE	(PRORATE	Kind o	of Lease Federal or Fee	La	ase No.
Location Unit Letter H	_ :	1530	_ Fect F	rom The	FNL Lin	se and8	330 Fe	et From The _	FEL	Line
Section 16 Townshi	29	N	Range	9W	, N	мрм,	SAN	JUAN		Соипту
II. DESIGNATION OF TRAN Name of Authorized Transporter of Oil MERIDIAN-OIL INC. Name of Authorized Transporter of Casing		OF OF O	nsale	ID NATU	Address (Gi	AST 30TH	which approved STREET, which approved	FARMING	TON CO	87401
EL PASO NATURAL GAS CO f well produces oil or liquids, ive location of tanks.	MPANY Unit 	Sec.	Twp.	f Rge.	P O B	OX 1492, y connected?	EL PASO	TX 79	978	
this production is commingled with that I	rom any od	her lease or	pool, gi	ve comming	ling order num	ber:				
Designate Type of Completion	- (X)	Oil Well		Gas Well	i	Workover	Deepen	Plug Back	iame Res'v	Diff Res'v
Date Spudded	Date Com	pl. Ready to	Prod.		Total Depth			P.B.T.D.		•
evations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth		
erforations	L				1			Depth Casing	Shoe	
HOLE SIZE		TUBING, SING & TU			CEMENTI	NG RECOR		SA	ACKS CEME	NT
. TEST DATA AND REQUES	T FOR A	LLOW	ABLE							
IL WELL (Test must be after re tate First New Oil Run To Tank	Due of Te		of load	oil and must			omable for this ump, gas lýt, et		full 24 hour.	:)
ength of Test	Tubing Pressure				Casing Pressure			FEE	VE	7
ciual Prod. During Test	Oil - Bbis.				Water - Bbls.			Gas-MCF JUL 5 1	990	y —
SAS WELL							OIL	CON	DIL 4	
ctual Prod. Test - MCI/D	Length of Test				Bbls. Condensate/MMCF			DIST. 3		
esting Method (pilot, back pr.)	Tubing Pressure (Stiut-in)				Casing Pressure (Shut-in)			Clicke Size		••
I. OPERATOR CERTIFICATE OF COMPLIANCE Thereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. Signature					OIL CONSERVATION DIVISION Date Approved JUL 5 1990 By 3> Char					
Pinted Name Title June 25, 1990 Date Telephone No.					SUPERVISOR DISTRICT 13					

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.
- 31 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.