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

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., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator		10 11 11		<u> </u>	.,		Well	API No.			
Cinco Ltd.						30-039-24070					
Address Box 451, Albuque	rque, 1	New Mex	kico,	87103							
Reason(s) for Filing (Check proper box) Other (Please explain)											
New Well		Change is	Transpo	nter of:							
Recompletion	Oil	Ī	Dry Ga	. 🗆	,	,	. /	,			
Change in Operator		€ Long	یه د کدلور								
Change in Operator Casinghead Gas Condensate X If change of operator give name and address of previous operator											
II. DESCRIPTION OF WELL AND LEASE											
Lease Name			Well No. Pool Name, Including			ng Formation			Kind of Lease State Lease No.		
State Pat			1 Blanco Mes			sa Verde			State, Pederal or Fee E-178		
Location											
Unit LetterD	::	960	Feet Pr	om The $\frac{1}{2}$	Worth Line	and11	100 Fe	et From The	West	Line	
Section 32 Township) .	30N	Range	7W	, NI	ирм,		Rio A	rriba	County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS											
Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)											
Giant Refining P.O.Box 1887, Bloomfield, New Mexico, 874									. 87413		
Name of Authorized Transporter of Casing	head Gas		or Dry	Gas 📉		e address to wh					
El Paso Natural		<i>لــــا</i>	- -y			x 990. Fa					
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge.	is gas actually		When		*****************		
give location of tanks.	D	32	30	7	Yes		i	March	23, 198	7	
If this production is commingled with that from any other lease or pool, give commingling order number:											
IV. COMPLETION DATA		Oil Well	-, ,	las Well	New Well	Workover	Deepen	Phys Rack	Same Res'v	Diff Res'v	
Designate Type of Completion	· (X)	JOH WEI	l`	X	X	WORLOVEI	Doepen	I ling bear			
Date Spudded	Date Com	pl. Ready to	Prod.		Total Depth	1		P.B.T.D.			
10/13/86	11/26/86			5700 '			5656'				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth				
6186' GR	Mesa Verde			4591'			5583'				
Perforations								Depth Casin	g Shoe		
4591' - 5579' 5698'											
TUBING, CASING AND					CEMENTING RECORD						
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT				
12 1/4"	9 5/8"			316'			190				
8 3/4"	7"			3374			240				
6 1/4"	4 1/2"			3202'- 5698'			295				
V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)											
			of load o	oil and must	be equal to or	exceed top allo	wable for thi	depth or be	or IWI 44-NO	<u> </u>	
Date First New Oil Run To Tank	Date of Test				Producing Method (Flow, pump, Din Ec. C E V E					11:	
							16(Choke Size			
Length of Test	Tubing Pro	SSUTE .			Casing Pressu	ie ,	u u	EB02	1990		
					Water - Bbis.	 .	<u> </u>				
Actual Prod. During Test	Oil - Bbls.				Water - Bois.				1. DIV		
<u> </u>						OIL CON. DIV					
GAS WELL					, 			_			
Actual Prod. Test - MCF/D	Length of	Test			Bbls. Conden	sate/MIMCF		Gravity of C			
3753			hrs.			. 75			~ -63	1	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size				
back press.	825 psig			850 psiq			<u> </u>	3/4''			
VI. OPERATOR CERTIFICATE OF COMPLIANCE					ہ اا		0-51	ATION		1	
I hereby certify that the rules and regulations of the Oil Conservation						DIL CON	SEHV	AHON	DIVISIO	JN 🗽	
Division have been complied with and that the information given above					FED 0.9 1000						
is true and complete to the best of my knowledge and belief.					Date Approved FEB 0 2 1990						
Jef & Filled											
Signature Robert E. Fielder Agent					By 3.1) Chang						
Robert E. Fielder Agent Printed Name Title					SUPERVISOR DISTRICT #3						
February 2, 1990 325–5220					Title						
Date Telephone No.											
					<u> </u>				Y		

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.