Submit 5 Copies
Appropriate District Office
DISTRICT 1
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

| 1, | | 10 Ins | 41121 | PUNI UI | L AND NA | TURAL G | | | | | |
|--|-----------------------------|-----------------|---------|----------------|---|-----------------|-----------------|-------------------------|----------------|------------|--|
| | | | | | | | | I API No. 04508476 | | | |
| Address 1670 Broadway, P. O. | |). Denv | er. | Colorac | lo 80201 | | | | | | |
| Reason(s) for Filing (Check proper box) | | , 2001 | | 001014 | | er (Please expl | ain) | | | | |
| New Well | | Change in | Trans | sporter of: | | • | • | | | | |
| Recompletion | Oil | | Dry (| - — | | | | | | | |
| Change in Operator | Casinghe | ad Gas 🔲 | Cond | lensate X | | | | | | | |
| If change of operator give name and address of previous operator | | | | | | | | | | | |
| II. DESCRIPTION OF WELL Lease Name | AND LE | ASE Well No. | Pool | Name Includ | ling Formation | ··· | | | | N. | |
| CORNELL D | 1 | | | | | - · . | | | ERAL SF077123 | | |
| Ocation Unit Letter : 1136 Feet From The | | | | | SL Line and 1625 | | | set From TheLine | | | |
| Section 12 Township | ip 29N Range 12W | | | | , NMPM, SAN J | | | JAN County | | | |
| III. DESIGNATION OF TRAN | SPORTE | | IL A | | | | | | | | |
| Name of Authorized Transporter of Oil or Condensate X | | | | | Address (Give address to which approved copy of this form is to be sent) P. O. BOX 4289, FARMINGTON, CO 87499 | | | | | | |
| Name of Authorized Transporter of Casinghead Gas or Dry Gas X EL PASO NATURAL GAS COMPANY | | | | | Address (Give address to which approved copy of this form is to be sent) P. O. BOX 1492, EL PASO, TX 79978 | | | | | | |
| If well produces oil or liquids, give location of tanks. | Unit | Sec. | Twp. | Rge. | is gas actually connected? When | | | _ ````` | | | |
| If this production is commingled with that IV. COMPLETION DATA | from any ot | her lease or | pool, g | give comming | ling order num | ber: | | | | | |
| Designate Type of Completion | - (X) | Oil Well | | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v | Diff Res'v | |
| Date Spudded | Date Compl. Ready to Prod. | | | | Total Depth | | | P.B.T.D. | | | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of Producing Formation | | | | Top Oil/Gas Pay | | | Tubing Depth | | | |
| l'erforations | | | | | | | | Depth Casing Shoe | | | |
| | | m.10.11.0 | | | OT 150 100 | IO DEGOD | | <u> </u> | | | |
| TUBING, CASING AND | | | | | † | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | | | DEPTH SET | | | SACKS CEMENT | | | |
| | ļ | | | | | | | | - | | |
| | | | | · | ļ | | | | | | |
| | | | | | | | | | | | |
| V. TEST DATA AND REQUES | | | | | | | | | | | |
| OIL WELL (Test must be after re | | | of load | d oil and musi | · · · · · · · · · · · · · · · · · · · | | | | or full 24 hou | us.) | |
| Date First New Oil Run To Tank | Date of Te | SI. | | | Producing Me | thod (Flow, pu | mp, gas lift, e | ic.) | | | |
| Length of Test | Tubing Pressure | | | | Casing Pressure | | | Me Ec | GEI | A E U | |
| Actual Prod. During Test | Oil - Bbls. | | | | Water - Bbls. | | | MCF AU | G O 7 19 | 89 | |
| GAS WELL | <u> </u> | | | | J | | | Oli | CON. | DIV. | |
| Actual Prod. Test - MCF/D | Length of Test | | | | Bbls. Condensate/MMCF | | | Gravity of Consessite 3 | | | |
| Festing Method (pitot, back pr.) | Tubing Pressure (Shut-in) | | | | Casing Pressure (Shut-in) | | | Choke Size | | | |
| VI OPERATOR CERTIFIC | ATE OF | COMP | TIA | NCE | | | | L | | | |
| VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above | | | | | OIL CONSERVATION DIVISION | | | | | | |
| is true and complete to the best of my knowledge and belief. | | | | | Date | Approve | d | AUG 0 | AUG 07 1989 | | |
| J. J. Hampton | | | | | By | By Bund? Chang | | | | | |
| Signature J. L. Hampton Sr. Staff Admin. Suprv. Printed Name Title | | | | | SUPERVISION DISTRICT # 3 | | | | | | |
| 7.28.89 303-830-5025 Date Telephone No. | | | | | Title. | <u></u> | | | | | |

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.