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

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

SUPERVISOR DISTRICT # 3

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

| 1000 Rio Brazos Rd., Aztec, NM 87410 L. | REQUES | | | | | | | . O. N. | DIV | |
|--|--|---------------------------|--|---------------------------|-------------------------------------|-----------------|---------------------------|---------------------------------------|------------------------------|--|
| • Operator | 101 | HANS | PORT OF | L AND NA | TURAL G | | API No. | | <u> </u> | |
| Robert L. Bayle | | | 30-045-21625 | | | | | | | |
| Address | | | | | | | 30 043 | 21025 | | |
| P.O. Box 168, F. Reason(s) for Filing (Check proper box | armington, N | M 87 | 499 | | (D1 | | | | | |
| lew Well | | e in Tran | sporter of: | | ner (Please exp | lain) | | | | |
| ecompletion | Oil | _ | Gas 🗆 | | | | | | | |
| hange in Operator X | Casinghead Gas | ☐ Con | densale 🗌 | | · | | | | | |
| change of operator give name ad address of previous operator | Merrion Oil | & Gas | Corp. | P.O. Bo | x 840. F | armingto | on. NM | 87499 | | |
| L. DESCRIPTION OF WELL | L AND LEASE Well | No IBoo | l Name Jacked | ing Formation | | | | | | |
| Navajo H | 15 | į į | Indesign: | ated Pic | LU. KUT tured C1 | iffs State, | of Lease Federal or Fe | 14-20 | ease No.)-603-219 | |
| Location Unit Letter A | . 890 | East | From The | north ::- | 79 | 90 r. | | (Navajo) | | |
| Section 13 Towns | | | | | | | eet From The | <u>east</u> | Line | |
| | | Ran | | | МРМ, | San J | luan | | County | |
| II. DESIGNATION OF TRA | | OIL A | ND NATU | | ve address to w | hich approved | l copy of this j | form is to be se | int) | |
| lame of Authorized Transporter of Casi Gas Company of I | | or D | ry Gas X | | e address to w | | | | | |
| well produces oil or liquids, | Unit Sec. | Tw | l Poe | P.O. Box 1899, Bloom | | | | | | |
| ve location of tanks. | | Unit Soc. Twp. Rge. | | | Is gas actually connected? When Ves | | | • | | |
| this production is commingled with the COMPLETION DATA | t from any other lease | or pool, | give comming | | | | | · · · · · · · · · · · · · · · · · · · | | |
| Designate Type of Completion | loii v | Vell | Gas Well | New Well | Workover | Deepen | Plug Back | Same Res'v | Diff Res'v | |
| ate Spudded | Date Compl. Reac | y to Prod | • | Total Depth | L | <u></u> | P.B.T.D. | L | _L | |
| evations (DF, RKB, RT, GR, etc.) | ns (DF, RKB, RT, GR, etc.) Name of Producing Formation | | | Top Oil/Gas Pay | | | Tubing Depth | | | |
| erforations | | | | | | | | | | |
| | | | | | | | Depth Casin | g Shoe | | |
| TUBING, CASING AN | | | | CEMENTI | | | | | | |
| HOLE SIZE | CASING & TUBING SIZE | | | DEPTH SET | | | SACKS CEMENT | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| TEST DATA AND REQUE | ST FOR ALLO | WABL | E | | | | | | | |
| _ | recovery of total volu | | | be equal to or | exceed top allo | owable for this | depth or be f | or full 24 hour | r.) | |
| ate First New Oil Run To Tank | Date of Test | | | | thod (Flow, pu | | | - | - | |
| ength of Test | Tubing Pressure | Tubing Pressure | | | Casing Pressure | | | Choke Size | | |
| ctual Prod. During Test | Oil - Bbls. | Oil - Bbls. | | | Water - Bbis. | | | Gas- MCF | | |
| | | | ······································ | | | | <u></u> | | | |
| GAS WELL clust Prod. Test - MCF/D | Length of Test | | | Bbis. Conden | sale/MMCF | | (Gravity of C | ondensate | | |
| | | | | | | | | Gravity of Condensate | | |
| sting Method (pitot, back pr.) | Tubing Pressure (| Tubing Pressure (Shut-in) | | | Casing Pressure (Shut-in) | | | | | |
| /I. 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 erry knowledge, and belief. | | | | Date ApprovedAN 18 198 | | | | | | |
| | | | | By | | 37 | made | . Com | X | |
| Robert L. Bayle | 0 | erato | or | Jy | | | · | | V | |

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Date

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Title

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Title

Telephone No.

<u>505/326-2659</u>

- 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.