Submit 5 Copies Appropriate District Office DISTRICT J P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Anesia, NM 88210

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

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

<u>l</u>	·	TO TRA	ANSPO	JIO TRC	L AND NA	TURAL G	iAS				
Operator Usadington Odl		102						API No.			
Headington Oil			l	30-045-25027							
	fferen 1	Ave	C11 + 4 ~	010 n.	onues CC	90335					
7114 W. Je Reason(s) for Filing (Check proper bas	TICISON A	ave.,	our ce	2.13, D		1 1Please exp	dain)			· · · · · · · · · · · · · · · · · · ·	
New Well	•	Change in	в Тгавиро	rter of:	(.) Out	in the second	-440 1)				
Recompletion	Oil		Diy Ga								
Change in Operator X	Casinghea	d Osa 🔲	Conden	64ta []							
If change of operator give name and address of previous operator	Greenwoo	d Hold	dings	Inc.,	2582 Sou	ith Telo	n St. E	alewood	1. Color	ado 8011(
				······································	eren 🖷 - er er erenen sonann in prop			. 3 - 0 0 0 .	2122121	ado outro	
II. DESCRIPTION OF WELL AND LEASE Lease Name [Well No. Prod Name Inches					ing Formation			d of Lease _ Lease No.			
	Kirtland 14/55 Well No. Pool Name, Inclu				Gallup 11880			of Lease No. Federal or무슨			
Location				* 		11000	l		1		
Umi LetterM	:735		_ Feet Fr	un The	South line	and 510)	et From The	West	Llos	
Section 7 Town	#NIP 29N		Range	14W	. 141	41M	San Jua			County	
III. DESIGNATION OF TRA	MSPORTE	R OF O	IL AN	D NATU	RAL GAS						
io to totaga and bostinulus to amang	l r¥1	or Conder			Address (Give	alibers to w	hich approved	copy of this	form is to be s	eni)	
Gary-Williams E					370 1	7th Str	eet Suit	e 5300	Denver,	CO 80202	
Name of Authorized Transporter of Casinghead Gas or Dry Clat					Address (Give address to which approved copy of this form is to be sent)						
El Paso Natural Gas If well produces oil or liquids, Uait Sec. Twp. Rec.				P.O. Box 1492 E1 Paso Tx. 79978							
tive location of tanks.	M	7	•	1 Age.	1				1000		
If this production is contaminated with th	at from say oth	er lease or			Yes		II	ay 23,	1982		
IV. COMPLETION DATA											
Designate Time of Countries	- (1/)	Oil Well	1 0	ias Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Dill Res'v	
Designate Type of Completic Data Spudded		<u>.l</u>	l		l		j '		İ	1	
some abridated	Dale Comp	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, stc.) Name of Producing Formation					Top Oil/Gas Pay						
								Tubing Depth			
Perforations								Depth Cast	ne Shoe		
TUBING, CASING AND								214	5 (2)	····	
HOLE SIZE	CASING & TUBING SIZE				DEPTH SELD L SACH MENT						
				•			N				
							JAN	0 5 1994 '			
								DAI F	XX7		
V. TEST DATA AND REQU					· I		OIL C	ON. 1] V		
OIL WELL (Test must be after Date First New Oil Rus To Tank	recovery of la	tal volume	of load o	il and must	be equal to or	exceed top al	lowable for th	ist. J.	for full 24 hou	wa.j	
Plate of Test					Producing Method (Flow, pump, gas lift, etc.)						
Length of Tem	Tubing Pres	laite			Casing Presmi	nt		Choke Size			
	- Total B			The state of the s			CHORE SIET				
Actual Prod. During Test	d. During Test Oil - Bbls.				Water - Bbls.			Oss- MCF			
	l				l						
GAS WELL						-	1				
Actual Prod. Test - MCF/D Langth of Test					Bbls. Couden	ule/MMCF	:	Gravity of Condentate			
Testing Method (pitot, back pr)	Tukies Bes	Tubing Pressure (Shut in)									
tubiell ticcuite (2018 tv)				Casing Pressure (Shis la)			Choke Size				
VI. OPERATOR CERTIFI		COLAT		lor.	\r			J			
I hereby certify that the rules and me	CATE UP	CUMI! Oil Cosses	-LIVN	C.B	\parallel \sim		NSFRV	MOITA	DIMER)N	
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 JAN - 5 1994						
is true and complete to the best of m	iy knowledge an	d belief.			Data	Annrous		C - VIP	334		
	5				Dale	Approve		Λ			
Signature / asses	XXX	\mathcal{L}			By		Bis) eh	•/		
Signaturg James P. Ryder	. Ape	ratio	ns Mai	nager	∥ _D y			•	<u> </u>		
Inned Name		303-9			Title		JUFERV	SOH DIS	TRICT !	3	
December 15, 199	93										
•		Iele	phone N	•	11						

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.