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

P.O. Box 2088

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

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

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TIEGOLOTTOTTALLOTTABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator							Well	API No.				
D.J.SIMMONS							3	0-045-28	3090			
Address					·							
P.O.BOX 1469,	FARMIN	NGTON,	N.M.	. 874	199							
Reason(s) for Filing (Check proper box)					Ou	er (Please expl	lain)					
New Well X		Change in	Transpo	rter of:	_		•					
Recompletion	Oil	Ī	Dry Ga									
Change in Operator	Casinghea	d Gas 🔲	Conden	_	•							
f change of operator give name												
and address of previous operator												
II. DESCRIPTION OF WELL	AND LEA	ASE										
Lease Name	Well No. Pool Name, Includi				ing Formation Kind			of Lease No.				
AGGIE STATE	32	#1	BAS	SIN FE	RUITLAN	D COAL		Federal or Fee				
Location										· · · · · · · · · · · · · · · · · · ·		
Unit LetterH	_ : 20	70	Feet Fr	om The	N I in	e and870) .	et From The	Е			
				our rise	U		r	set From 1ne		Lipe		
Section 32 Townshi	p 29N	<u> </u>	Range	9W	. N	MPM,	SAN JU	JAN		County		
										Couldy		
II. DESIGNATION OF TRAN	SPORTE	R OF O	LAN	D NATU	RAL GAS							
Name of Authorized Transporter of Oil X or Condensate Address (Give address to which approved copy of this form is to be zent)									nt)			
GARY ENERGY CORP.						115 INVERNESS DR.E, ENGLEWOOD, CO. 80112						
Name of Authorized Transporter of Casing			or Dry	Gas X	Address (Giv	e address to wi	hich approved	copy of this for	m is to be se	nt)		
EL PASO NATURAL G	AS CO.				Р.О.ВО	X 1492.	EL PA	SO TEX	AS 799	978 -14 9		
If well produces oil or liquids,	vell produces oil or liquids, Unit Sec. Two. Re				is gas actually connected? When					3.0 1.3		
ive location of tanks.		29N	9W	NO			ASAP	ı				
this production is commingled with that	from any oth	er lease or p	ool, giv	comming!	ing order numi	ber:						
V. COMPLETION DATA					_							
Davis and Book and Company		Oil Well	0	as Well	New Well	Workover	Deepen	Plug Back S	ame Res'v	Diff Res'v		
Designate Type of Completion	- (X)	1	i	X	X	i	1		MIN WAS A	pili Resv		
Date Spudded		d. Ready to			Total Depth			P.B.T.D.				
10-07-90	1	1-26-	90		i	2 4 75 '			464'	,		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth					
6092 GL FRUITLAND					2298'			2433'				
								Depth Casing	Shoe			
2298-2314,2336-38,								2	474'			
	T	UBING,	CASIN	IG AND	CEMENTI	NG RECOR	D					
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT					
12-1/4"	8-	8-5/8" - 24.0#			231			140				
								 	- 10			
7-7/8"			- 10	.5#		2474			520			
	2	3/8"	- 41.	7#		2433		 	320			
. TEST DATA AND REQUES	T FOR A	LLOWA	BLE									
OIL WELL (Test must be after re	ecovery of lo	cal volume o	fload o	il and must	be equal to or	exceed top allo	wable for this	depth or be for	full 24 hour	re i		
Date First New Oil Run To Tank	Date of Ten	4			Producing Me	thod (Flow, pu	mp, gas lift, e	tc.)	J 0 - 144 - 1	3.7		
	<u> </u>					•		•				
ength of Test	Tubing Parket Parket			क्षेत्र 💢	Claing Pressure			530 P 0				
				_∯ 5				IU) E	E /	1 5 En		
Actual Prod. During Test	Oil - Biblis				Water - Bbls.			MCA				
	Li il	<u> </u>	1 O K	100	'A service of the ser			DEC	w/a ann			
GAS WELL		950	1 . K. 44						X 4 199	0 -		
Actual Prod. Test - MCF/D	Length of	all (ोप	1 7 5 6 1	Bbis. Conden	-10 A A A CE		Ollace	سنده			
	, ,	<i>∳</i> !Ь ❤ `	74. J.	ا	DVIE CONGEN	PRINCILATIVE.		CHANGE CO	ON.			
esting Method (pitot, back pr.)	Tubing Pres	seure (Shut-	1 <u>51</u>	.>	Casing Pressu	m (Chie in)		D	IST 3			
BACK PRESS.	1	598				599		Choke Size				
I. OPERATOR CERTIFIC	ATE OF					333		1				
I hereby certify that the rules and moute	ATE OF	COMP	LIAN	CE	ے ا		CEDV					
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above							OEHVA	ATION D	IVISIO	N		
is true and complete to the best of my knowledge and belief.				DEO 1 0 1000								
						Date ApprovedDEC 1 9 1990						
What I wast								<u> </u>				
Signature					By							
ROD PINKETT PETROLEUM ENGINEER												
Printed Name Title					Tial		SUPERV	SOR DIST	RICT #	a		
$\frac{12-08-90}{\text{Date}}$ (50)	<u>5) 326</u>	-3753			Title.					<u> </u>		
w-10		Telep	hone No	. —	1							
INCOME					<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
- 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.