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 I-1-89 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Anesia, 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 Hallador Pe	Hallador Petroleum Company						Well API No. 300452525700S1			
Address 1580 Lincoln St. #1000, Denver, CO 80203										
Reason(s) for Filing (Check proper box) New Well Recompletion Change in Operator	Change i Oil Casinghead Gas	n Transporter of: Dry Gas Condensate	Oth	er (Please expl						
and address of previous operator	imbark Oil &	Gas Company	, 1580 L	<u>incoln S</u>	t. #100	O, Denver	, CO 8	30203		
II. DESCRIPTION OF WELL Lease Name Gotur Location		ing Formation me Parad	ox	l l	of Lease No., Federal or Fee MOO-C-1420-062					
Unit LetterA	: <u>~1000</u> B 31N	Feet From The Range 14W				et From The	East	Line		
	<u> </u>		 	мрм,	San	Juan	····	County		
Name of Authorized Transporter of Oil Permian Name of Authorized Transporter of Casing	Address (Give address to which approved copy of this form is to be sent) PO Box 1183, Houston, Texas 77251-1183 Address (Give address to which approved copy of this form is to be sent)									
El Paso Natural G	Natural Gas			o 1492, I	El Paso	TX 799		<i></i>)		
If well produces oil or liquids, give location of tanks.	Unit S∞c. A 8	Twp. Rge. 31N 14W	Is gas actually connected? When? Yes 3/18/83							
If this production is commingled with that : IV. COMPLETION DATA	from any other lease of	r pool, give comming	ling order numb	per:		· · · · · · · · · · · · · · · · · · ·				
Designate Type of Completion	- (X) Oil Wel	l Gas Well	New Well	Workover	Deepen	Plug Back Sa	ıme Res'v	Diff Res'v		
Date Spudded	Date Compl. Ready t	o Prod.	Total Depth	l	L	P.B.T.D.		1		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing F	Top Oil/Gas Pay			Tubing Depth					
Torations			1				Depth Casing Shoe			
	TUBING	CEMENTII	CEMENTING RECORD							
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT				
V. TEST DATA AND REQUES OIL WELL Test must be after n		•								
Date First New Oil Run To Tank	Date of Test	oj toda oti ana musi		thod (Flow, pu			јші 24 пош	rs.)		
Length of Test	Tubing Pressure	Casing Pressure			Choke Size					
Actual Prod. During Test	Oil - Bbls.		Water - Bbis.		M	Gas- MCF				
GAS WELL						MAR1 2 19	90	· · · · · · · · · · · · · · · · · · ·		
Actual Prod. Test - MCF/D	Length of Test		Bbls. Condensate/MMCF		Oll	OIL COMONDIV.				
Testing Method (pitot, back pr.)	Tubing Pressure (Shu	Casing Pressure (Shut-in)			Chote Site					
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 is true and complied to the heat of my based do each belief.				OIL CONSERVATION DIVISION						
is true and complete to the best of my knowledge and belief.				Date Approved						
Signature LILL LAM T VIDLEC DESCRIPTION					3.1	i) el	/			
WILLIAM T. KRIEG, PRESIDENT Printed Name Title 3/7/90 (303) 839-5504				TitleSUPERVISOR DISTRICT #3						
Date	Te	lephone No.			B.12 of the state	MANUFACINA (NO. 100 Names of the				

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.