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Appropriate District Office
DISTRICT!
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, Anesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088 REQUEST FOR ALLOWABLE AND AUTHORIZATION

1.	l	U IRAI	NSP	JHI OIL	AND NA	TURAL G					
Operator 21ST CENTURY INVI	ESTMENT COMPANY 3757 6							0-045-11305			
Address c/o Walsh Engr. & Prod. Corp.								0 049 11305			
204 N. Auburn	Farming	ton,	New	Mexico	87401						
Reason(s) for Filing (Check proper box) New Weil		Change in T	T-nuno	ere of		er (Please expl					
Recompletion	O:I		Dry Ga	_						ment Co.	
Change in Operator	Casinghead		Conden		۷.	145 E. 2	ith St.	, Tulsa	, OK /4.	1.1.4	
If change of operator give name and address of previous operator			Inc.	2250	East 73	rd St.,	Suite 4	00 Tuls	sa, OK 7	74136	
II. DESCRIPTION OF WELL					JECTION V						
Lease Name			Pool N	ame, Includ	ng Formation			of Lease		.case No.	
									Federal or Fee I-149-IND-7850		
Location C	610				North	100		ndian			
Unit Letter	_ :		Feet Fr	om The	North Lin	and	<u> </u>	et From The	west	Line	
Section 25 Townshi	p 32	N	Range	18W	, NI	<u>мрм,</u>	San Ju	an		County	
III. DESIGNATION OF TRAN		OF OII		D NATU							
Name of Authorized Transporter of Oil	Address (Gin	ces (Give address to which approved copy of this form is to be sent).									
Name of Authorized Transporter of Casing	Address (Give address to which approved copy of this Jurin w to be sent)										
If well produces oil or liquids, Unit Sec. Twp. Rg					Is gas actually connected? When?						
give location of tanks.		i		1							
If this production is commingled with that	from any othe	r lease or po	ool, giv	e comming	ing order numb	жг					
IV. COMPLETION DATA		Oil Well		Jas Well	New Well	Workover	Deepen	Dina Rack	Same Rea'v	Diff Resiv	
Designate Type of Completion	- (X)			J25 WCII	1			l Link pack	Pattie Ver A		
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			
Perforations								Depth Casing Shoe			
HOLE SIZE	TUBING, CASING AND CASING & TUBING SIZE				CEMENTI	DEPTH SET			SACKS CEMENT		
HOLE SIZE	CASING & TOBING SIZE				DEFIN SCI			SACKS CEMENT			
V. TEST DATA AND REQUES	T FOR A	LLOWA	BLE		<u> </u>			1	·····	,	
OIL WELL (Test must be after r				oil and must	be equal to or	exceed sop all	omable for thi	s depih or be	for full 24 hoi	urs.)	
Date First New Oil Run To Tank Date of Test Producing Method (Flow, pump, gas lift, etc.)											
Length of Test	Tubing Pressure				Casing Pressu	ire		Choke Size			
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gas- MCF			
GAS WELL					•				1 .40.4		
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF			Gavity of			
Testing Method (pitot, back pr.)	ack pr.) Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)				Choke Size		
results (paid, back pr.)	(Min m)			Caring Production (Street 12)			Close Stre	- 1 - 2 - 42			
VI. OPERATOR CERTIFIC	ATE OF	COMPI	LIAN	ICE			ICEDV	ATION		~ · · ·	
I hereby certify that the rules and regulations of the Oil Conservation					OIL CONSERVATION DIVISION						
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					Date Approved NOV 2 2 1993						
FOR: 21st CENTURY INVESTMENT COMPANY					Date	Approve	ia	10 4 10 10	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
Paul C. Thampson					By_	By 7 A					
Signature Paul C. Thompson Agent											
Printed Name Title 11/16/93 505 327-4892					Title		SUPER	VISOR DI	STRICT	18	
Date			hone N								

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.