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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

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., Aztec, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

•	<u> </u>	U IHA	11/2	PORT OIL	AND NAT	UNALGA	10	PI No.			
Operator									5-25	373	
Kern Co								OU UA	<u></u>	- '	
3005 North Big Sp	ring St	., Mi	dlar	nd, Texas	s 79705						
Reason(s) for Filing (Check proper box)					Othe	т (Please expla	iin)				
New Well		Change in		sporter of:							
Recompletion $\square$	Oil Casinahaad		Dry	Gas 🛆 iensate							
Change in Operator	Casinghead	Gas	Conc	bensate				·	<del></del>		
nd address of previous operator		·							<del> </del>		
I. DESCRIPTION OF WELL A	AND LEA	SE	<b>,</b>				<del></del>		<del>- 1 .</del>		
Lease Name Eunice Cooper	Well No. Pool Name, Including 1 Jalmat Tans							of Lease Lease No. Federal or Fee			
Location					. •						
Unit Letter P	:66	0	_ Feet	From The So	uth Line	and66	Fe Fe	et From The	East	Line	
Section 11 Township	24-S	<u> </u>	Rang	ge <u>36-E</u>	, NI	MPM, L	ea			County	
III. DESIGNATION OF TRANS	SPORTE	R OF O	IL A	ND NATU	RAL GAS						
Name of Authorized Transporter of Oil		or Conde			Address (Give	e address to wh	hich approved	copy of this f	orm is to be se	ent)	
Name of Authorized Transporter of Casing		ry Gas X	Address (Give address to which appr			red copy of this form is to be sent)					
Sid Richardson Carbon	& Gasol							10 Main St., Fort Worth, TX			
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp.		o. Rge.	Is gas actually connected? Whyes		When	n? 76102 7/28/77				
If this production is commingled with that if	from any other	r lease or	pool.	give comming!	<del></del>		L	.,201			
IV. COMPLETION DATA			, , , , , , , , , , , , , , , , , , ,								
Designate Type of Completion	- (X)	Oil Wel	1	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
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 Casir	ng Shoe		
	77	IDDIC	CA	CINIC AND	CEMENITI	NC DECOR	<u> </u>				
HOLE SIZE	TUBING, CASING AND CASING & TUBING SIZE				DEPTH SET				SACKS CEMENT		
HOLE SIZE											
TOTAL AND DECLIE	T FOD A	I I OXI	ADI	TC	L						
V. TEST DATA AND REQUES OIL WELL (Test must be after r.	OF FUR A	LLUYY tal valume	A.D.L.	ac. ad oil and must	be equal to or	exceed top all	owable for th	is depth or be	for full 24 hou	ers.)	
Date First New Oil Run To Tank	Date of Tes		. 0, 10.			ethod (Flow, pr			· · · · · · · · · · · · · · · · · · ·	<del> </del>	
								Chaka Sira			
Length of Test	Tubing Pressure				Casing Pressure			Choke Size			
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gas- MCF			
		<del></del>									
GAS WELL	11	rt			Dhia Candi	sote ANACE		Gravity of	Condensate	<del></del>	
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
VII ODED ATION CERTIFICA	ATTE OF	0010	י זמ	ANICE	1						
VI. OPERATOR CERTIFICATE OF COMPLIANCE					OIL CONSERVATION DIVISION						
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 complete to the best of my knowledge and belief.					Date Approved						
Signature					By_	DRIGINAL	SIGNED S	y jerry s	EXTON		
Michael Hithers Fieldman					DRIENCE : BUSERAIRON						
Printed Name 2/21/92	/ (9:	15) 68	33 <b>–</b> 4	le +832	Title			4			
Date	<u></u>	Te	lephor	ne No.							

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.