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

DISTRICT II P.O. Drawer DD, Artesia, 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	TRAN	SPO	HI OIL	AND NA	I UHAL GA	Well A	PI No.			
C. GENE CROW						3002526245 0051					
Address 6346 Elder Grove	Drive,	Dallas	s, T∈	exas 75						7	
Reason(s) for Filing (Check proper box) New Well Recompletion	Other (Please explain) (I dd Federal Le Lenn Merce Le Lenn Mountain Standard Time										
change of operator give name nd address of previous operator	an Petro	oleum (Corpo	oration 204	n, 2626	Cole Ave	nue, Su	ite 630	, Lock B	ox 63,	
I. DESCRIPTION OF WELL	AND LEAS	SE					1 *** *	<u> </u>	1 -	ase No.	
Lease Name Linebery Federal	Well No. Pool Name, Includ			Bruns				of Lease Lease No. Federal or Fee NM-34477			
Location Unit LetterE	:1,6	50 F	eet From	m The $\frac{\mathrm{No}}{}$	rth Lin	e and330	Fe	et From The	West	Line	
	,23 Sout		Range	38 Ea		MPM,	Lea			County	
III. DESIGNATION OF TRAN	SPORTER	OF OII	AND	NATU	Address (Gi)	ve address to wh	ich approved	copy of this fe	orm is to be se	nt)	
ame of Authorized Transporter of Oil X or Condensate					Address (Give address to which approved copy of this form is to be sent) 1406 North West County Rd., Hobbs, NM 88240						
Conoco, Inc. Name of Authorized Transporter of Casing	ghead Gas	ad Gas X or Dry Gas			Address (Gir	ve address to wh	hich approved	copy of this form is to be sent)			
Warren Petroleum Com	oany				P. O. Box 1589, Tuls Is gas actually connected?			a, OK 74102			
If well produces oil or liquids, give location of tanks.	Unit E		Twp. 235	Rge. 38E	Is gas actual Yes	-	when	March,	1983		
If this production is commingled with that	from any othe	r lease or po	ool, give	commingl	ing order num	iber:					
IV. COMPLETION DATA		Oil Well	,	ias Well	New Well		Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion Date Spudded	- (X) Date Compl	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			
	т	UBING.	CASIN	NG AND	CEMENT	ING RECOR	ED				
HOLE SIZE	- 1 2010 A TURNIO CITE				DEPTH SET			SACKS CEMENT			
	CT FOR A	LLOWA	RIF								
V. TEST DATA AND REQUE OIL WELL (Test must be after	OI FUK A recovery of to	ial volume o	of load o	oil and mus	t be equal to	or exceed top all	lowable for th	is depth or be	for full 24 hor	urs.)	
Date First New Oil Run To Tank	Date of Test				Producing N	Method (Flow, p	ownp, gas lift,	etc.)	!tc.)		
Length of Test	Tubing Pressure				Casing Pressure			Choke Size			
Actual Prod. During Test	Oil - Bbls.				Water - Bbis.			Gas- MCF			
GAS WELL					Phis Cond	ensate/MMCF		Gravity of	Condensate		
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF						
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
VI. OPERATOR CERTIFIC I hereby certify that the rules and regularision have been complied with an is true and complete to the best of my	ulations of the d that the info	Oil Conser	vation		Do	OIL CO			1,	ON √€	
E General Complete to the coast of my	_		<u></u>	-		te Approv					
Signature C. Gene Crow			Title		11						
Printed Name Sept. 12, 1990 Date		214/33 Tele				IG					

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.

 A) Separate Form C-104 must be filed for each pool in multiply completed wells.