Subtrat 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

DISTRICT III
1000 Rio Brazos Rd., Aziec, NM \$7410

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

L. Operator		O THAN	NSPORT OIL	AND NA	TURAL GA		UPI Na			
Snyder Oil Company							004120680			
Address	0-16-05	.00	7	. 1 =	74100					
801 Cherry Street, (Reason(s) for Filing (Check proper box)	Suite 25	00	Fort Wor		as 76102 عامین Please معام	<u></u>)				
New Well			ransporter of:	_						
Recompletion	Oil		Ony Gus							
Change in Operator y I change of operator give name Nati	Casinghead		Condensate							
ad address of previous operator NAE	urai kes	ource I	Management	Corpora			Texas 7	o, Suite	≥ 2600	
I. DESCRIPTION OF WELL										
ase Name Well No. Pool Name, lack Sieber 1 Chaveron							of Lease No. Federal or Fee 01348			
Location	<u> </u>		Onaveroo,	Dair Aire	1169	1		- 013	+0	
Unit LetterF	: <u>1</u>	980 F	est From The N	orth Lie	21.7°		et From The .	West		
Section 17 Townsh	in 7S	•	tange 34E	.	MPM. I	Roosevel	I +		C	
Secuola - Towns	.тр		CHAN DAD		MIM, I	KOOSEVE.	<u> </u>		County	
II. DESIGNATION OF TRAI										
Name of Authorized Transporter of Oil	1 / 1	or Condense	71)	<u>'</u>	e eddress to w	• • •			•	
Western 011 Transpot Name of Authorized Transporter of Casis	x Dry Gas	P.O. Box 1183 Houston, Texas=77001 Address (Give address to which approved copy of this form is to be sent)								
Gities Service Oil & Cas Corporation OXV				LP.O. Box 300 Tulsa, O						
If well produces oil or liquids, rive location of tanks.	• :			is gas actuall	-	When	•			
f this production is commingled with that	from any other	17 or no	7S 34E		<u> ES</u>	N/A	05/04/	84	·	
IV. COMPLETION DATA						N/A	· · · · · · · · · · · · · · · · · · ·			
Designate Type of Completion	(20)	Oil Well	Gas Well	New Well	Workowir	Despen	Plug Back	Same Resiv	Diff Resiv	
Date Studded		i. Ready to F	rod.	Total Depth	L	L	P.B.T.D.	<u> </u>	<u> </u>	
		,					The second second			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/Clas Pay			Tubing Depth Depth Caung Shoe			
Perforations										
			······	CEMENTING RECORD			I			
HOLE SIZE	CAS	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT		
V. TEST DATA AND REQUE	ST FOR A	IIOWA	RIF	<u> </u>		·····	<u> </u>			
OIL WELL (Test must be after			•	be aqual to or	exceed top all	owable for th	s depth or be	for full 24 hou	FS.)	
Date First New Oil Rua To Tank	Producing Method (Flow, pump, gas lift, etc.)									
Length of Test	Tubin B			Casing Press			Ohoke Size	Choke Size		
Paulin or 14m	Lubing Pres	Tubing Pressure			Canal Product					
Actual Prod. During Test	Oil - Bbls.	Oil - Bbls.			Weser - Bbis			Gas- MCF		
GAS WELL Actual Prod. Test - MCF/D	Length of	Tare		1551. <i>C</i> 2-	AADT!		10	Condon		
WEIGHT LOOP TON'S MICELIA	Length Of	1 661		Bbis. Condenmis/MMCT			Gravity of Condensate			
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in)			a)	Casing Pressure (Shut-in)			Choke Size	Choke Size		
			· · · · · · · · · · · · · · · · · · ·	<u>ار</u>			1			
VI. OPERATOR CERTIFIC				11 (NSERV	ATION	DIVISIO	NC	
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.					OIL CONSERVATION DIVISION Date Approved					
										12
Signature Signature	<u> </u>			By_		E	ddie W	Seav		
Tom J. Bass Jr. St	r. V.P.							Inspecte	5 61	
Printed Name 5/9/E9	81	7/338-4	Tille 4043	Title			~ ~ ~ ~ ·	2 × 1 × 1 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1/2 1	. · · · · · · · · · · · · · · · · · · ·	
Date			hose No.	11						

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.