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Appropriate District Office
SISTRICT 1
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., Aziec, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

	<u> </u>	O IHA	NSPOR	11 OIL			Well API	No.			
stor	ANV						30-0	25 <b>-</b> 05983	<u> </u>		
RCO OIL AND GAS COMP	WINT	, <del>-</del>									
ress BOX 1710 HOBBS, NM	88240				X Other	(Please explain)					
son(s) for Filing (Check proper box)		<b>.</b>	Tmassade	r of:	EFFECT	IVE 2/15,	91				
Well		Change in	Transporte Dry Ges			٠					
ompletion	Oil Casinghear	=	Condens	ste							
nge in Operator	Camillian										
ange of operator give name											
DESCRIPTION OF WELL	AND LEA	SE	De al Ma	ne Incheliae	Formation		Kind of	Lease	•	se No.	
se Name		Well No.	EUMO!	ne, including NT-Y-SF	R-QN		State, F	ederal of Fee	FEE		
BARBER GAS COM									EAST	Line	
cation P	. 99	0	Feet Fro	m The SOI	JTH Line	and 660 ·	Fee	t From The	ERDI		
Unit Letter	:				, NIM	DM.	LEA			County	
Section 7 Townsh	i <b>p</b> 20	<u>S</u>	Range	37 E	, NW	IFNL					
	· · · · · · · · · · · · · · · · · · ·	D OF C	MI. ANI	NATUE	RAL GAS			of this for	rm is to be set	u)	
. DESIGNATION OF TRAI	NSPORT	or Cond	ensate		Address (Give	address to which	h approved	copy of this ju	, m <b>u</b> u u u u	_,	
ame of Authorized Transporter of Oil						address to whi	h approved	copy of this fo	rm is to be se	nt)	
ame of Authorized Transporter of Casi	nghead Gas		or Dry	Cas 🛣	BOX 15	89, TULS	, OK	74102			
ARREN PETROLEUM CORP		10-	Twp	Rge.	is gas actually		When	?	91		
well produces oil or liquids,	Unit	it Sec. 144		YES		L	2/15/91				
this production is commingled with the	at from any o	ther lease	or pool, giv	e comming	ing order numb	ber:					
this production is committigled with the A. COMPLETION DATA	_ ,, -				New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
	<b>GD</b>	Oil W	ell (	Gas Well	I New Men	1		Ĺ	L	_L	
Designate Type of Completio	ጠ - (ኢ)	mpl. Ready	to Prod.		Total Depth	<u> </u>		P.B.T.D.			
Date Spudded	Date Co	upt. Ross,			ANT COL	<b>N</b>		Tubing Dep	ch .		
levations (DF, RKB, RT, GR, etc.)	Name of	Name of Producing Formation				Top Cis Cas 1-37					
TCASTIONS (NL. VVIN. VII.) ON TOWN					1			Depth Casit	ng Shoe		
erforations								1			
		TUBING, CASING AND				CEMENTING RECORD			SACKS CEMENT		
HOLE SIZE		CASING & TUBING SIZE			<del> </del>	DEPTH SET					
HULE SIZE											
					+						
V. TEST DATA AND REQU	IEST FOI	ALLO	WABL	E		ad ton all	anable for t	his depth or be	for full 24 he	ours.)	
V. TEST DATA AND REQU OIL WELL (Test must be af	ter recovery	of total vol	ume of load	d oil and mu	Producing 1	Method (Flow, p	ump, gas lift	, etc.)			
Date First New Oil Run To Tank	Date of	Tes			1100Dorme .						
		m Line Durent			Casing Pressure			Choke Siz	Choke Size		
Length of Test	Tubing	Tubing Pressure						Gas- MCI	Gas- MCF		
Actual Prod. During Test	Oil - I	bis			Water - Bb	ols.					
Actual Prod. During 1000											
GAS WELL					This Con	densate/MMCF		Gravity o	Condensate		
Actual Prod. Test - MCF/D	Lengt	n of Test			1			Choke Si			
		Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			2 <b>£</b>		
Testing Method (pilot, back pr.)	Tubin	R Liesenie	(w.w. ~/								
	1	2°333		سدت ، سد	11	OIL CC	NSFR	VATIO	אועוט וי	ION	
	1 97 W L 1 WE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_	M .	OIL OU	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	الرائدة فعا	2 0 19	91	
VA UICKAIÜK ČERII	MICA E	of the Oil	Conservatio	<b>XQ</b> .	11			- I. L.		# F	
I hereby certify that the rules and	regulations (	informati	on given a	pa pove		nto Annoros	rod	LED	<i>€</i> . 10		
I hereby certify that the rules and Division have been complied with is true and complete to the best of	regulations (	informati	on given a	pove bove	Da	ate Approv	(A)	,			
I hereby certify that the rules and Division have been complied with is true and complete to the best of	h and that the f my knowle	informati	on given a	on bove			<b>S</b>	1 <b>Don</b> i (5211)	ιώ.		
I hereby certify that the rules and Division have been complied with is true and complete to the best of	h and that the	e informati	on given a	bove	- B)		<b>S</b>	,	ιώ.		
I hereby certify that the rules and Division have been complied with is true and complete to the best of	h and that the	e informati	os given si lief. VE_SUP	PERVISO	- By	/	<b>S</b>	1 <b>Don</b> i (5211)	ιώ.		
I hereby certify that the rules and Division have been complied with is true and complete to the best of	ADMINS	e informati	on given a lief.  VE SUP  Ti	PERVISO	- By		<b>S</b>	1 <b>Don</b> i (5211)	ιώ.		

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance INSTRUCTIONS: This form is to be filed in compliance with Rule 1104
- 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.