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/TRICT 1

J. Box 1980, Hobbs, NM 88240

ASTRICT II A.O. Drawer DD, Artesia, NM 88210

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89
See Instructions
at Bottom of Page
RECEIVED

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 000 Rio Brazos Rd., Aztec, NM 87410	DEOL	IEST EC	אם אוו	OWARI	LE AND A	UTHORIZ	ATION		JAN 10	'90	
					AND NAT		S		٥٠٠	O	
Operator								Well API No. 30-015- OSTESSA, OFFICE			
Socorro Petroleum Co			30-013- 63643								
viddress P.O. Box 38, Loco Hi	11s. N	IM 8825	55								
eason(s) for Filing (Check proper box)	.113/ 1/	11 0023			Other	(Please expla	in)	· · · · · · · · · · · · · · · · · · ·			
ew Well		Change in	Transporte	er of:							
ecompletion	Oil		Dry Gas				erator Na				
hange in Operator 🔯			Condensa				nuary 1,			 – – – – – – – – – – – – – – – – –	
change of operator give name d address of previous operator Hard	corn Oi	1 Compa	any, F	.0. Bo	x 2879,	Victoria	a, TX 7	7901	·		
I. DESCRIPTION OF WELL	AND LE	ASE									
ease Name	g Formation Kind of State/Formation Kind of State/Formation										
H.E. West "A"		4	Gray	burg Ja	ackson//	RV QGSA	State/1	ederal/or Fee	10029	420A	
ocation \coprod	. 198	۲۸		M	orth Line	. (.)	۳ م		East		
Unit Letter	-:	30	Feet From	m The 🗸 🗥	Of Che Line	and	U I ee	t From The _		Line	
Section Township	Section Township 17S Range 31E					, NMPM, Eddy				County	
11. DESIGNATION OF TRAN Name of Authorized Transporter of Oil				NATU	Address (Giw	aktress to w	hich approved	copy of this fe	orm is to be se	nt)	
Texas-New Mexico Piperine Company						ddress (Give address to which approved copy of this form is to be sent) P.O. Box 2528, Hobbs, NM 88240					
Name of Authorized Transporter of Casing	ghead Gas	[XX]	or Dry C	ias 🗀	Address (Give	e address to w	hich approved	copy of this f	orm is to be se	nt)	
Continental Oil Company					ļ		proved copy of this form is to be sent) bbs, NM 88240				
If well produces oil or liquids, give location of tanks.	Unit 1 A	S∞c. 4	Twp. 17S	Rge. 31E	is gas actually	y connected?	When	⁷ 5-0	60		
f this production is commingled with that	-1	.	1		ing order numb	 					
V. COMPLETION DATA			lural Bris				 				
D	(3/)	Oil Well	G	as Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion					Total Depth	J	.	.====	<u> </u>		
Date Spudded	Date Con	npl. Ready to	o Ptod.		Total Depair			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	levations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Vil/Cas	Top Oil/Gat Pay			Tubing Depth		
Perforations								Depth Casin	ng Shoe		
			G . 00	10 110	OEL (ELITE			<u> </u>		·	
LIOLE CIZE					CEMENTI	DEPTH SET		1	SACKS CEM	ENT	
HOLE SIZE	CASING & TUBING SIZE				DEF ITT SET			Post ID-3 2-5-90			
							· · · · · · · · · · · · · · · · · · ·		chy of	24	
V. TEST DATA AND REQUE	 - 	TIT7	7 10 1 15		1			1	0 1	·	
OIL WELL (Test must be after				oil and mus	t be equal to o	r exceed top al	llowable for the	is depth or be	for full 24 ho	ws.)	
Date First New Oil Run To Tank	Date of						pump, gas lift,				
	_							Choke Size			
Length of Test	Tubing Pressure				Casing Pressure						
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gas- MCF			
					J						
GAS WELL											
Actual Prod. Test - MCF/D	Length	of Test			Bbls. Conde	nsale/MMCI	- 	Gravity of	Condensale		
	— 	Tubing Pressure (Clud.in)			Casing Pressure (Shut-in)			Choke Size			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			CHURC SIZE				
VI OREDATION CERTIFICA	CATE	25.6014	DITAN	JCE	-\r					 	
VI. OPERATOR CERTIFIC I hereby certify that the rules and reg				ハしに		OIL CO	NSERV	'ATION	DIVISI	ON	
Division have been complied with an	d that the in	nformation g	iven abov	e					4000		
is true and complete to the best of my	y knowledg	e and belief.	\sim		Dat	e Approv	red FI	B - 9	19 9 U		
(De m m)	12	out									
Signature	- 00		 		Ву.	<u>CRIG</u>	INAL SIGI	VED BY			
Ben D. Gould		1	Manage	<u>er</u>	11	MIKS	: WILMAM	S DISTRICT	· 1 1		
Printed Name 1/2/90		505	Title /677–2	2360	Title	9	ERVISOR,				
Date			elephone l								

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) Senarate Form C-104 must be filed for each roal in multiply completed wells