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Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Ene , Minerals and Natural Resources Departmen

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

DISTRICT II P.O. Drawer DD, Arte iia, NM 88210

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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1000	Rio	Brazos	Rd.	Aztec.	NM	87410
			,			

OOO Rio Brizos Rd., Aziec, NM 87410				-		AUTHORIZ					
•	T	OTRA	NSPOF	RT OIL	AND NA	TURAL GA		BCA1.			
Operator RB Operating Company			1	Weii API No. 30-015-26709							
Address 601 N. Marienfeld, Suit	te 102,	Midla	nd, TX	7	9701						
Reason(s) for Filing (Check proper box)					Oth	t (Please expla	in)			···	
lew Well	4	Change in	Transporte	r of:							
Recompletion X	Oil		Dry Gas								
Change in Operator	Casinghead	Gas 🗌	Condensat	e 🗌							
change of operator give name											
I. DESCRIPTION OF WELL A	ND LEA	SE									
Lease Name Candie "13"	Well No. Pool Name, Including						of Lease Lease No. Federal or Fee				
Location	_										
Unit Letter M	:5	60	Feet From	The	West Lin	and	Fe	et From The	South	Line	
Section 13 Township	238	<del></del>	Range	28E	, N	мРМ,	Eddy			County	
II. DESIGNATION OF TRANS	SPORTE	R OF OI	L AND	NATU	RAL GAS						
Name of Authorized Transporter of Oil x or Condensate				7	Address (Give address to which approved copy of this form is to be sent)					nt)	
Pride Pipeline Company	ىم	× L				ox 2436,	Abilene	, TX 7	79604		
			X or Dry Gas			Address (Give address to which approved P.O. Box 1492, E1 Paso					
If well produces oil or liquids, give location of tanks.					ls gas actually connected? When ? Yes 5/			? /7/91			
this production is commingled with that five COMPLETION DATA	rom any othe	er lease or	pool, give o	commingl	ing order num	ber:					
Designate Type of Completion -	(X)	Oil Well	Gas	Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded Workover	Date Comp	i. Ready to	Prod.		Total Depth			P.B.T.D.	P.B.T.D.		
6/3/92	6-23-92			6300'			6017' RBP				
Elevations (DF, RKB, RT, GR, etc.)	Name of Pr	oducing Fo	mation		Top Oil/Gas Pay			Tubing Depth			
2993' K.B.	Delawa	re			5804'			5711'			
Perforations								Depth Casing Shoe			
5804-5822' & 5851-5871								630	70.		
					CEMENTI	NG RECOR					
HOLE SIZE		SING & TU	JBING SIZ	<u>'E</u>	<del></del>	DEPTH SET			SACKS CEM	ENI	
12-1/4"	8-5/8"				582			350 . 675 sx lst stage			
7-7/8"	5-1/2				6300				75 sx Ls 20 sx th	•	
			. 51.5		• • • • • • • • • • • • • • • • • • • •						
V. TEST DATA AND REQUES OIL WELL (Test must be after re	TFOR A	LLOW i	ABLE of load oil	and muel	be equal to o	exceed top alle	owable for thi	s depth or be	for full 24 hou	ors.)	
Date First New Oil Run To Tank	Date of Te		0) 1000 01	4782 //4451		ethod (Flow, pi			, , , , , , , , , , , , , , , , , , , ,		
6-23-92	6-28-92			Flow							
Length of Test	Tubing Pressure			Casing Pressure		Choke Size					
24 hours	620			0			22/64"				
Actual Prod. During Test				******	Water - Bbis.			Gas- MCF			
-				167		1801					
GAS WELL	******										
Actual Prod. Test - MCF/D	Length of	Test			Bbls. Conde	nsate/MMCF		Gravity of	Condensate		
sting Method (puot, back pr.)  Tubing Pressure (Shut-in)			Casing Press	sing Pressure (Shut-in) Choke Size							
VI. OPERATOR CERTIFIC				CE		OIL CON	NSERV	ATION	DIVISION	 DN	

Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

lin Signature Tim Goudeau Manager, Southern Region Printed Name 7/23/92 Date (915) 682-0095 Telephone No.

JUL 2 9 1992 Date Approved \_ ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT IT Title.

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.