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

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NIM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.	T	O TRAI	NSPC	ORT OIL	AND NAT	URAL GA		bt Ma			
Operator Great Western Re	Well Al			00392337300S1							
Address 1111 Bagby Stree	t. Hous	ton, T	'exas	77002							
Reason(s) for Filing (Check proper box) New Well Recompletion Change in Operator		Change in 1		rter of:	Othe	t (Please expla	in)				
change of operator give name					- 		_ _				
ad address of previous operator	NDIE	CF.									
I. DESCRIPTION OF WELL A Lasse Name Martin-Whittaker	,	Well No.	- 11		og Formation	abota Ex		Lease Fed Federal or Fee		ase Na. 363	
Location	. 16					and _//90		et From The	West	Line	
Unit Letter	23N		Range	4W			is a			County	
II. DESIGNATION OF TRANS					RAL GAS						
Name of Authorized Transporter of Oil	PAJ .	or Condens	nie.		· ·	address to wh	7.7				
Cary Williams Energy Corporation					Address (Giv	e address to wh	rick approved	ld, New Mexico 87413 copy of this form is to be sent) , Texas 79978			
If well produces oil or liquids,		Sec.	Twp.	Rge.	is gas actually	actually connected?		10/30/84			
pive location of tanks.	\mathcal{K}_{\perp}	7_1	<u>23N</u>	14W	1 ye			10/30	107		
f this production is commingled with that f V. COMPLETION DATA	rom any othe	er lease or p	ood, giv	e commingl	rug order mun			······· =	, <u> </u>		
Designate Type of Completion	· (X)	Oil Well	10	Gas Weil	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compi. 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					I			Depth Casing Shoe			
		UBING,	CASI	NG AND	CEMENTI	NG RECOR	D				
HOLE SIZE	HOLE SIZE CASING & TUBING SIZE					DEPTH SET		SACKS CEMENT			
V. TEST DATA AND REQUES	T FOR A	LLOWA	ABLE		<u> </u>			1			
OIL WELL (Test must be after n	7		of load	oil and must					for full 24 hos	ers.)	
Date First New Oil Run To Tank	nat New Oil Run To Tank Date of Test					Producing Method (Flow, pump, gas lift, etc.)					
Length of Test	Tubing Pressure			Casing Pressure			Choke Size				
Actual Prod. During Test	Oil - Bbls.				Water - Bbis.			Gas- MCF			
GAS WELL	_l				<u> </u>						
Actual Prod. Test - MCF/D	Length of Test				Bbis. Condenses/MMCF			Gravity of Condensate			
sting Method (pitot, back pr.) Tubing Pressure (Shut-in)					Casing Pressure (Shut-is)			Chold 502e			
VI. OPERATOR CERTIFICATE OF COMPLIANCE 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 SEP 0.5 1989						
Eyd Hines					By						
Signature CYD HINES Printed Name				sistant		٤		ION DIST	RICT #	3	
8/29/89 Date	(71	.3) 739 Tek	9-840		Title)		•••	-		
•			- p		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.