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, Anesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

1.	,	TO TRA	ANSP	ORTO	L AND N	ATURAL (GAS	Y			
Operator							We	Well API No.			
Parker & Parker Oil & Gas, Inc. Address								30-043-20	077		
903 W. Apache, Farm	ington, l	NM 874	01								
Reason(s) for Filing (Check proper box) New Well					[] O	ther (Please ex	plain)				
Recompletion []	Change in Transporter of: Oil Dry Gas										
Change in Operator	Casinghead										
If change of operator give name Pa					e, Farmi	ngton, N	M 87401		·		
II. DESCRIPTION OF WELL	ANDIE	LCE									
Lease Name	ting Formation			Kind of Lease No.							
Quinella	1 Lybrook G				-			Kind of Lease Lease No. State, Federal or Fee NM58871			
Location	0	.00							12.12.20		
Unit LetterD	: 9	90	Feet Fr	rom The	Li	ne and	990	Feet From The .	<u> </u>	Line	
Section 31 Townsh	nip 23	N	Range	6W	.1	MPM, Sand	loval			County	
III DECIGNATION OF TO A	10000mm									County	
III. DESIGNATION OF TRAIT Name of Authorized Transporter of Oil	JRAL GAS Address (Give address to which approved copy of this form is to be sent)										
Giant		Farmington, NM 87401									
Name of Authorized Transporter of Casir	Gas []	Address (Give address to which approved copy of this form is to be sent)									
El Paso Natrual Gas If well produces oil or liquids, Unit Sec. Twn. Roe					Farmington, NM 87401						
give location of tanks.	Unit :		Twp. 23N	1 Kge.	Yes	lly connected?	Whe	n? 1985			
f this production is commingled with that	from any othe					ıber:	l	1903			
V. COMPLETION DATA		-,				-					
Designate Type of Completion	- (X)	Oil Well	0	Sas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl.	Date Compl. Ready to Prod.			Total Depth		1	P.B.T.D.		.]	
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			1.5.1.5,			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas	Pay		Tubing Depth			
Perforations								Depth Casing Shoe			
		·							,		
HOLE SIZE	TUBING, CASING AND				DEPTH SET						
TIONE VICE	CASING & TUBING SIZE			SACKS CEMENT							
						***			···		
. TEST DATA AND REQUES	 ST FOR AL	LOWA	BLE								
OIL WELL (Test must be after r				il and must	be equal to or	exceed top all	owable for th	is depth or be fo	or full 24 hour	re l	
Date First New Oil Run To Tank Date of Test					Producing Method (Flow, pump, gas lyl, etc.)						
ength of Test	Tubing Press				Casina Prosm				****		
	ruoing riessure				Casing Pressure			Coxe			
Actual Prod. During Test	Oil - Bbls.	Oil - Bbls.					IN	Gas- MCF			
TAC TUDE I								OCT 3:	1 1990		
JAS WELL Actual Prod. Test - MCF/D	I anoth of Ta							OII CA	AL M	J	
West Community of the C	Length of Test				Bbls. Condensate/MMCF			DIST. 3			
sting Method (pitot, back pr.) Tubing Pressure (Shut-in)					Casing Pressure (Shut-in)			Choke Size			
I OUCD AROO GENERAL											
I. OPERATOR CERTIFICATION OF THE PROPERTY OF T	ATE OF C	COMPL	JIAN(CE			ICEDY.	ATION -			
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 CONSEP			RVATION DIVISION			
					Date Approved 0 C			OCT 3 1	Γ3 <u>1</u> 19 90		
Ilmel 18 line					Dale	White AB	u		A		
Signature_					By Bin Show						
Floyd C. Parker Printed Name			es.					·····	UCTDIO-	1.0	
10-23-90	10-23-90 505-327-5336					SUPERVISOR DISTRICT #3				#3	
Date											

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
- 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.