Submit 5 Copies
Appropriate District Office
DISTRICT!
P.O. Box 1980, Hobbs, NM 88240

DISID OF THEM TO Energy, Minerals and Natural Resources Department

Revised 1-1-87 See Instructions at Bottom of Page

DISTRICT II P.O. Drawer DD, Artesia, 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

	TO	TRANS	PORT OIL A	E AND AL ND NATL	JRAL GA	S Well API	No.		
						30-0)43-20°	702	
ior Veteran Explorati	on, Inc				0023				
test 4643 So. Ulster S	t., Sui	te 119	0, Denve	y Other	, 8023 (Piease explai	n)			
son(s) for Filing (Check proper box)		hange in Tren				me and	Addres	s Chang	ge
v Well	Oil	Dry		Opera	tor Na	me and	210.0.2		_
ompletion		Jas 🔲 Con	denute 🗌				. 52	OO De	nver,C
ange in Operator unge of operator give name The Caddress of previous operator	Jary-Wi	lliams	Company	, 370 1	7th St	reet, S	te. 53	100, De	HVC170
DESCRIPTION OF WELL	ARITA T TO A C	217				Kind of	Lease	Les	26 I/O
use Name	A		io Puerc	o. Mano	.os	XXXX, Pe	deral ox FeX	NM-38	576
San Isidro 18		8 R	TO FUELC	<u> </u>				Eact	Line
cation	. 2015	Per	et From The No	rth Line	and 695	Feet	From The	East	
Unit Letter H					PM.	Sando	val		County
Section 18 Townsh	p 20N	Ra	nee 3W	, NM	PM4				
. DESIGNATION OF TRAIN	UCDADTET	OF OIL	AND NATUR	AL GAS	, <u>, , , , , , , , , , , , , , , , , , </u>	hich approved c	and this for	m is to be ser	u)
DESIGNATION OF TRAI	42LOKIEW	or Condensate		Address (Give	eddress to W	9, Bloo	mfield	. N.M.	,8 <u>7413</u>
Gary/Energy Corp				P.O.	Box 15	hich approved t	opy of this fo	em is to be set	ਪ)
ime of Authorized Trensporter of Casin	nghead Gas	Of Of	Dry Ges	Address (UIM	GOOD ESS NO H				
N/A		- In	wp. Rge.	is gas actually	connected?	When	•		
well produces oil or liquids,	7,	18	20N 3W	N/A	1				
re location of tanks. this production is commingled with the	e from any oux	er lease or por	ol, give commingli	ng order numi	:				
this production is comminged with the V. COMPLETION DATA	# Main 1					Deepea	Plus Back	Same Res'v	Diff Res'v
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Designate Type of Completion	n - (X)	1		Total Depth	J <u>.</u>		P.B.T.D.		
Pate Spudded	Date Comp	A. Ready to P	TV Q.						
	Name of B	roducing Form	netion	Top Oil/Gas	Pay	'	Tubing Dep	th	
lievations (DF, RKB, RT, GR, etc.)	Marine of 13	tomane					Depth Casis	ng Shoe	
							Depair cann		
erforations							.		
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V. TEST DATA AND REQU	EST FOR A	ALLOWA	BING SIZE	Producing I	or exceed top Method (Flow	allowable for th purp, gas lift.	is depth or be	e for full 24 ho	
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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.