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

DISTRICT II
P.O.Drawer DD, Artesia, NM 88210

DISTRICT III 1000 RIO Brazos Rd,Aztec,NM 87410

State of New Mexico Energy, Minerals and Natural Resources Department Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

1.	IO TRANSPOI	HI OIL AND NA	TURAL GAS		
Operator Well API No.					
MW Petroleum (30-039-06077			
	SUITE 1900, DENVER, CO	80203-4519		× /2 2 4 4	*
Reason(s) for Filing (Check proper New Well	· · · · · · · · · · · · · · · · · · ·	Other (Plea	se explain)	PELAE	
H	Change in Transporter of: Dry Gas	Effective 01-01-94			
	inclive of or ye	MI.			
	inghead Condensate	 	Chi	CON. DIV	7
f change of operator give name and address of previous operator					
II. DESCRIPTION OF WELL AND L			Tarrica		-
Lease Name Well No. Pool Name, Including Fred Phillips D 1 Tapacito - PC		ng Formation Kind of Lease State, Federal of		Lease No. Agreement NM 01137	
Fred Phillips D Location	1 Tapacito - FC		State, 1 decial of 2	1 IAIAI OI	.13/
Unit LetterI	: 1800 Feet From The _	S Line and 99	Feet From T	he E	Line
			- 		
Section 10 Township 25	N Range 3W	, имрм, Rio Arriba		C	ounty
III. DESIGNATION OF TRANSPOR		1.11		-64:6	
Name of Authorized Transporter of	of Oil 🛭 or Condensate 🗌		Englished approved copy		1
Giant Refining Name of Authorized Transporter of	P. O. Box 256, Farmington, NM 87499 Address (Give address to which approved copy of this form to be sent)				
El Paso Natural	P. O. Box 4990, Farmington, NM 87401				
If well produces oil or liquids,	Unit Sec. Twp. Rge.	Is gas actually connec		hen ?	
give location of tanks.					
	rith that from any other lease or pool, gi	ve commingling order nu	mber:		
IV. COMPLETION DATA	Oil Well Gas Well	New Well Workove	r Deepen Plug	Back Same Res'v	Diff Res'v
Designate Type of Completion	- (X)			l 	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.	T.D.	
				 <u></u>	
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth	
Perforations				Depth Casing Shoe	
Choradons			•	· ·	
	TUBING, CASING	AND CEMENTING REC	ORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH :	SET	SACKS CEMEN	<u>T</u>
					
V. TEST DATA AND REQUEST FO		<u> </u>			
OIL WELL (Test must be after rec	overy of total volume of load oil and mu			epth or be full 24 hours	<u>.)</u>
Date First New Oil Run to Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)			
Length of Test	Tubing Pressure	Casing Pressure	Cho	Choke Size	
Langua VI Teat					
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas	-MCF	
	<u></u>				
GAS WELL	Length of Test	Bbls. Condensate/MM	CF Ic-	vity of Condensate	
Actual Prod. Test-MCR/D	rengin or rest	DDIS. CONCENSATE/ MM	C. Gia	vity-of-condensate	
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut	-in) Cho	oke Size	
VI. OPERATOR CERTIFICATE OF COMPLIANCE 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 Date Approved					
Signature	, , , , , , , , , , , , , , , , , , , ,	— Bv	3. A)	Grand .	
JoAnn Smith		SUFERVISOR DISTRICT #3			
Printed Name	Engineering Tech Title	Title	المنافية الحاليد المناف		
12-15-93	(303) 837-5000				

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.