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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 Rottom of Page

DISTRICT II P.O. Drawer DD, Astonia, NM 88210 OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

L.	ı	UIHA	NO	OHI OIL	. ANU NA	I UHAL GA	AS				
Operator					<del>:</del>		i	JPI No.			
Oryx Energy Company							30-329-24051				
P. O. Box 1861,	Midland	Tava		79702							
Resson(s) for Filing (Check proper box)	rirdiand	, ICAC	13 /	7702	Oth	et (Please expl	ain)				
New Well		Change in	Trans	porter of:		•	-	r 1 10	QO chanc		
Recompletion	Change is Transporter of:  Effective November 1, 1990 change oil gatherer									,e	
Change in Operator	Casinghead	Ges 🗌	Cond			ii gatiit					
If change of operator give name											
, ,											
II. DESCRIPTION OF WELL	AND LEA		Book	Name, Includi	as Econotics	<del></del>	- Kind c	( Lease	T.	ease No.	
High Adventure (BPO)		1			an Mancos			State, Federal or Fee		NM-015 P35	
Location								876-326			
Unit Letter H	. 1650	0	Foot	From The N	orth Lie	e and 7	'90 🛌	et From The .		Line	
Section 8 Township	251	<u> </u>	Rang	2W	,N	MPM,	Rio A	rriba		County	
III DEGICNATION OF TRAN	CBADTE	08.01	nr Ai	NE NATE	DAT CAS						
III. DESIGNATION OF TRANS Name of Authorized Transporter of Oil		or Conden		TINN UNI	Address (Gir	e address to w	hich approved	copy of this !	orm is to be s	ent)	
Giant Refining Co.	X				P. O. Box 9156, Phoenix, Arizona 85068						
Name of Authorized Transporter of Casing	need Gas X or Dry Gas				Address (Gin	e address to w	hich approved	copy of this form is to be sent)			
Oryx Energy Company					P. O. Box 1861, Mi		<u>Midlan</u>	dland, Texas 79702			
If well produces oil or liquids,		Sec.	Twp.   Rge.				Whea	When ?		]	
give location of tanks.	H	8 1	251		Yes						
If this production is commingled with that it IV. COMPLETION DATA	Tom any other	er lease or p	1000i, 1	give comming	ling order num	ber:			<del></del>		
IV. COMPLETION DATA		Oil Well	$\neg$	Ges Well	New Well	Workover	Deepea	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	- (X)	i	i		i	<u> </u>	İ		<u> </u>		
Date Spudded	Date Comp	l. Ready to	Prod	•	Total Depth	·		P.B.T.D.			
					Too Oil/Coa Pau						
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Dep	Tuhing Depth		
Perforations					<u> </u>			Depth Casin	g Shoe		
								ļ			
	T	UBING,	CAS	SING AND	CEMENTI	NG RECOR	ש				
HOLE SIZE	CAS	ING & TU	BING	SIZE	DEPTH SET			SACKS CEMENT			
				<del>_</del>	<del> </del>						
	-	<u> </u>		<u> </u>		<del> </del>					
V. TEST DATA AND REQUES	T FOR A	LLOW	ABL.	E	<u> </u>	· · · · · · · · · · · · · · · · · · ·					
OIL WELL (Test must be after n	ecovery of to	tal volume	of los	d oil and mus			onable for thi	s depth as he	for full 24 hou	P3.)	
Date First New Oil Run To Tank	Date of Tes	<b>K</b>			Producing M	FI	Color IV	一 [[]	•	į	
Land of Total	Tubing Pressure				Casing Press		<b>W G</b> -	Choka Siza			
Length of Test	Inoma Lie	STATE .					W5 -19	<b>\$</b> 0			
Actual Prod. During Test	Oil - Bbls.				Water - Bble		) (	Gas, MCF	<u>-</u>		
_						67.03		1.3 .			
GAS WELL						Section 2	TOP .	*			
Actual Prod. Test - MCF/D	Leagth of	l'est			Bbls. Conde	ame/MMCF		Gravity of	Condensate		
						7.		Choke Size			
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)				Casing Press	mise (2pmr-in)		CHOKE SIZE	•		
					<b>├</b> ──		<del></del>	<u></u>			
VL OPERATOR CERTIFICATE OF COMPLIANCE						OIL CONSERVATION DIVISION					
I hereby certify that the rules and regulations of the Oil Conservation  Division have been complied with and that the information gives above						NOV 0.5 1990					
is true and complete to the best of my knowledge and belief.					Date	Date Approved					
11 +	D					J. (PP. U.)			1		
Mana I	- FB2	<del></del>			By_		منده	い <u>,</u> 日	hand		
Signature Maria L. Perez Proration Analyst					-, -	SUPERVISOR DISTRICT #3					
Printed Name	<del></del>		Title		Title	<b>)</b>					
11-1-90	(915)			- N							
Date		Tek	ephon	e No.							

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.