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Appropriate District Office
DISTPICT I
P.O. Box 1980, Hobbs, NM 88240

## State of New Mexico Energy, Minerais and Natural Resources Department

Form C-104
Revised 1-1-89
See Instructions
at Rottom of Page

DISTRICT II P.O. Drawer DD, Artessa, NM 88210 OIL CONSERVATION DIVISION
P.O. Box 2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, New Mexico 87504-2088

I.					ABLE AND OIL AND N			N			
Operator	eer Drilling Corp.				SIL AIVE IV	ATOTIVE		ell API No. 30-039-2	-24057		
Address		-				Sansi a a	87401	30-039-2	.4037		
221 Petroleum Cent	er Buil	Lding,	rar —	mingto		ther (Please ex					
New Well		Change in	Trans	porter of:	<u> </u>	·	•	_			
Recompletion	Oil		Dry (		Alex	: Ehan	ye E	rly			
Change in Operator XX  If change or operator give name		d Gas					<u> J                                    </u>	<del></del>			
and address of previous operator Ory	x Energ	y Comp	oany	. P.O.	Box 263	<u>00, 0k1a</u>	homa Ci	ty. O.K.	_73126 <u>-</u> 0	1300	
II. DESCRIPTION OF WELL	AND LE								-		
Lease Name Full Sail "C"	Well No. Pool Name, Includ					a		nd of Lease ste. Federal or Fe			
Location		4	<u></u>	GGG Da	akota				NPI Z	.3039	
	_ :14	20	_ Feet i	From The	South L	ine and6	60	Feet From The	East	Line	
Section 30 Townshi	<b>p</b> 25N	I	Range	2W		NMPM,		Rio Arr	iha	County	
Section 3.0 Townsin	<u>p</u>	·	icange								
III. DESIGNATION OF TRAN				TAN DI			which come	and come of this t	orm is to be se	ati	
Name of Authorized Transporter of Oil or Condensate  Giant Refining Co						Address (Give address to which approved copy of this form is to be sent)  P.O. Box 9156, Phoenix, Arizona 85068					
Name of Authorized Transporter of Casin	Authorized Transporter of Casinghead Gas or Dry Gas [				Kodress (C	ive gadress to	waich appro	ved copy of this !	copy of this form is to be sent) . Farmington, NM 87401		
Benson-Montin-Greer Dr	<del> </del>	$\overline{}$	l m	<del></del>					gton,NM	8/401	
If well produces oil or liquids, give location of tanks.	Unit	<b>Sec.</b> 30	Twp.	<i>'</i> / '	W ves	a de la companya della companya della companya de la companya della companya dell	1	hen?			
If this production is commingled with that	from any oth				<del></del>	<del>-</del>					
IV. COMPLETION DATA					1				la put	Diff Back	
Designate Type of Completion	- (X)	Oil Well	i	Gas Weil	New Wel	I Workover	Deeper	n   Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Comp	i. Ready to	Prod.		Total Depti	1		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Ga	s Pav		Tubina Dan	Tubing Depth		
Elevations (DF, AAD, A1, OA, etc.)						,		Lanting Deb	Taking Depair		
Perforations						-		Depth Casin	g Shoe		
<del></del>	т	TIRING	CASI	NG AN	D CEMENT	TNG PECO	PD .				
TUBING, CASING AND HOLE SIZE CASING & TUBING SIZE					D CENTERY I	DEPTH SE			SACKS CEMENT		
	!				-				<del> </del>		
	<u> </u>										
V. TEST DATA AND REQUES					·						
OIL WELL (Test must be after re Date First New Oil Run To Tank	*		of load	oil and mu		or exceed top at Method (Flow, p			or full 24 hour	** F	
Date Luzt Idea Ott Kmt 10 1707	Date of Tes				Flourang i	neucu (1100, p	, gas 14		명 2. ( ) 	120	
Length of Test Tubing Pressure			e			Casing Pressure			DEC2 0 1991		
Actual Prod. During Test	Oil - Bbls.		<del></del>	_	Water - Bbl	Water - Bbis.			OIL CON. DIV.		
								OIL	<u> </u>		
GAS WELL	T				The Conde	nsate/MMCF		Convity of C			
Actual Prod. Test - MCF/D	Length of Test				Sous. Conde	MENTO MINICI		Glavity of C	Gravity of Condensate		
osting Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pres	sure (Shut-in)		Choke Size	Choke Size		
A ODED A TOD CEDITEICATE OF COMPLIANCE											
VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation						OIL CONSERVATION DIVISION					
Division have been complied with and that the information given above						DEC 0 0 1001					
is true and complete to the best of my knowledge and belief.						Date Approved DEC 2 9 1991					
////exxX/Meer						8 - 1 S(U) /					
Signature Albert R. Greer President						By Stanks. Save					
Albert R. Greer President  Printed Name Title						,	SUPERVI	SOR DISTR	CT#3		
/2-19-91 Date	505/	325-88 Telep	74 hone N	io.	Title	·		<del>,</del>			

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.