

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, Artesia, NM 88210

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Jack A. Cole	Well API No.
Address P. O. Box 191, Farmington, New Mexico 87499	
Reason(s) for Filing (Check proper box) ☒ Other (Please explain) New Well ☐ Change in Transporter of: Pool name change Recompletion ☐ Oil ☐ Dry Gas ☐ Change in Operator ☐ Casinghead Gas ☐ Condensate ☐	
If change of operator give name and address of previous operator	

II. DESCRIPTION OF WELL AND LEASE

Lease Name Rincon	Well No. 11	Pool Name, including Formation Escrito-Gallup Associated	Kind of Lease Federal State, Federal or Fee	Lease No. NM - 58973
Location Unit Letter I : 1880 Feet From The South Line and 930 Feet From The East Line Section 31 Township 24N Range 6W NMPL Rio Arriba County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

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 256, Farmington NM 87499					
Name of Authorized Transporter of Casinghead Gas ☒ or Dry Gas ☐ Bannon Energy Inc.	Address (Give address to which approved copy of this form is to be sent) 3934 F.M. 1906, W. Suite 240 Houston TX 77068					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Ray		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Producing Method (Flow, pump, gas lift, etc.)
Length of Test	Casing Pressure
Actual Prod. During Test	Oil - Bbls.
OIL CON. DIV. FEB 01 1990	

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Abn. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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.

Signature Raymond H. Blarrett	Title Production Superintendent
Date January 25, 1990	Telephone No. 325-1415

OIL CONSERVATION DIVISION

Date Approved FEB 08 1990
By Burt J. Shum
Title SUPERVISOR DISTRICT #3

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.