15. DATE SPUDDED 16. DATE T.D. REACHED 17. DATE COMPL. (Ready to prod.) 2-7-73 2-12-73 10-19-73 6653 GR 6653 20. TOTAL DEPTH. MD & TVD 21. PLUG, BACK T.D., MD & TVD 22. IF MULTIPLE COMPL., HOW MANY* 3952 3916 24. PRODUCING INTERVAL(8), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Chacra 3898-3910 Chacra 3898-3910 CASING RECORD (Report all strings set in well) CASING RIZE WEIGHT, LB./FT. DEPTH BET (MD) HOLE SIZE CEMENTING EXCORD AMOUNT PULLED	DEPARTME	NITED ST ENT OF T LOGICAL S	HE IN	TERIOF	₹ struct	other in- tions on se side)	Bu LEASE DESI NM 019	
NETURE OF COMPLETION: NEW WOLL X OVER DEFT DACK DIFF. Other NEW WELL X OVER EN DECT DACK DIFF. Other 2. NAME OF OPERATOR WYNN Oil Company, Inc. 3. ADDRESS OF OPERATOR 1808 Campbell Centre, Dallas, Texas 75206 4. Location of well (Report location clearly and in accordance with any State requirements)* At surface 790 FEI; 1850 FSL At total depth 14. PERMIT NO. DATE INSUED 12. COUNTY OR ARIA ON ARIA At total depth 14. PERMIT NO. DATE INSUED 12. COUNTY OR PARISH SAI Juan New Mexico 15. DATE SPUDDED 16. DATE T.D. REACHED 17. DATE COMPL. (Ready to prod.) 18. ELEVATIONS (DF, REB, RT, GR, STC.)* 19. ELEV. CASINGHEAD 27. TOTAL DEPTH. NO a TVD 21. PLUG, RACK T.D., MD A TVD 22. IF MULTIPLE COMPL. Chacra 3898-3910 Chacra 3898-3910 CASING RECORD (Report all strings set in well) CASING RECORD (Report all strings set in well) CASING RECORD (Report all strings set in well)	WELL COMPLETION OR	RECOMPL	ETION I	REPORT	AND LO	3 * 6.	IP INDIAN,	ALLOTTEE OR TRIBE NAME
B TYPE OF COMPLETION: NEW WORK DREP DACK DEBYR Other BESVR Other S. FARM OR LEASE NAME	1a. TYPE OF WELL: OIL	GAB X	DRY 🗍	Other		7.	UNIT AGREE	MENT NAME
NAME OF OPERATOR Wynn Oil Company, Inc. 3 ADDRESS OF OPERATOR 1808 Campbell Centre, Dallas, Texas 75206 4 LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface 790 FEI; 1850 FSL At top prod. interval reported below At total depth 14. PERMIT NO. DATE ISSUED 12. COUNTY OR PARISH San Juan New Mexico 15. DATE SPUDDED 16. DATE T.D. REACHED 17. DATE COMPL. (Ready to prod.) 18. ELEVATIONS (DP, RES, RT, OR, STC.)* 19. ELEV. CASINGHEAD 6 10. FIELD AND POOL, OR WILDCAT Undesg. Chacra 11. SEC., T., R., W., OR BLOCK AND SURVE OR AREA San Juan New Mexico 15. DATE SPUDDED 16. DATE T.D. REACHED 17. DATE COMPL. (Ready to prod.) 18. ELEVATIONS (DP, RES, RT, OR, STC.)* 19. ELEV. CASINGHEAD 6 10. FIELD AND POOL, OR WILDCAT Undesg. Chacra 11. SEC., T., R., W., OR BLOCK AND SURVE SON ASTA PARISH San Juan New Mexico 16. DATE SPUDDED 27. TOTAL DEPTH. MD & TVD 21. PLUO, RACK T.D., MD & TVD 22. IF MCLTIPLE COMPL. HOW MANY? 23. INTERVALES ROTALY TOOLS CHACCA 3898-3910 26. TIPE ELECTRIC AND OTHER LOGS RUN LES CASING RECORD (Report all strings set in well) CARING HIZE WEIGHT, LB./FT. DEPTH BET (MD) HOLE SIZE CEMENTING RECORD AMOURT PULLBO	L TYPE OF COMPLETION:			otuei				
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At total depth 16. Date t.d. reached 17. Date completion 18. State 19. Date issued 18. State 19. Date issued 18. State 19. Date issued 19. State 19. Date issued 19. State 19. Date issued 19. Date issue								Federal
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San Juan New Mexico		14.	PERMIT NO.		DATE ISSUED	12.		13. STATE
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20. TOTAL DEPTH. MD & TVD 21. PLUG, BACK T.D., MD & TVD 22. IF MULTIPLE COMPL., 3952 3916 22. IF MULTIPLE COMPL., HOW MANY DELLED BY X 24. PRODUCING INTERVAL(8), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD) 25. WAS DIRECTIONAL SURVEY MADE Chacra 3898—3910 NO 26. TYPE ELECTRIC AND OTHER LOGS RUN IES CASING RECORD (Report all strings set in well) CASING HIZE WEIGHT, LB./FT. DEPTH SET (MD) HOLE SIZE CEMENTING EXCORD AMOUNT PULLED		i		o prod.) 18.	•		, BTC.)*	
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8-5/8	28 TYPE ELECTRIC AND OTHER LOGH RUN LES 28 CASING HIZE WEIGHT, LB/FT. 8-5/8 24.# 4-1/2 9.5# 29 LINER	CASING REDEPTH BET (MD 134.50 3926) но 12	2-1/4 5-3/4	100 350 30.	TUBII	NG RECOR	AMOUNT PULLED
31 PERFORATION SECOND (Internal, size and number) 82. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	31 PERFORATION RECORD (Interval, size and	number)		1 32	ACID SHOT	FRACTION	CEMENT	SOTTENANT WAS
Chacra 3900-3910 4/ft. DEPTH INTERVAL (MD) Chacra 3900-3910 4/ft. Chacra 3900-3910 4/ft.	Chacra 3900-3910 4/ft.			DEPTH INT	BRVAL (MD)	е заморя	AND KIND	OF MATERIAL USED
PRODUCTION PRODUCTION NETHON Classing and lift and the cold of the		Ai Popularia de l'Alamina			1 70/	4 60		
PRODUCTION METHOD Property Pro		Flow	DD'N. FOR		OIL	DISI.	Maiti.	n) ng on pip e line
FLOW, TUBING FRESS. (ASING PRESSCRE (ALCCLATED OIL-BBL. GAS-MCF. WATER-BBL. OIL GRAVITT-API (COR.)			BBL.	GA8)	Cr.	WATER-BBL.	- 01	H. GEARLEX-API (COSE.)
34 DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) THET WITHERED BY	34 DISPOSITION OF GAS (Sold, used for fuel, vo	ented, etc.)				T#81	WITHERN	D ST
35 LIST OF APTACHMENTS	35 HIST OF APTACHMENTS						. 1	10. 1077
36 I hereby certify that the foregoing and attached information is complete and correct as determined from all available received.	36 I hereby certify that the forevoice and							

Submit 5 Copies
Appropriate District Office
DISTRICT!
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, Antesia, 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

Operator		10 THA	MOPU	HI O	L AND NA	TUHAL	GAS					
L.P. Moor	c, I	NC					١.	II API No. 30-09	15-21	198		
Reason(s) for Filing (Check proper bo	778-	,		7	1 -			30-09 Co.				
Reason(s) for Filing (Check proper bo	<u> </u>		_3/	CAN	OU	Des (Please ex	Wes .	<u>Co.</u>	80%	77		
New Well		Change in				(F 1610) E.X	piain, >					
Recompletion	Oil		Dry Gas									
Change in Operator	Casinghea	d Gas 🗌	Condensa	te 🗌								
If change of operator give name and address of previous operator	WYNN		c Co	- ر.	INC.							
II. DESCRIPTION OF WEL	L ÁND LEA		· · · · · · · · · · · · · · · · · · ·									
Lease Name Well No. Pool Name, Inclu								d of Lease				
LArgo Feel		Le_	01	ero	CHA	CHA	Stat	e, Federal or Fe	NM	19403		
	11	50			_	وب-						
Unit Letter	:	30	Feet From	The	<u>.5</u> Lin	e and	90	Feet From The	<u> </u>	Line		
Section 14 Town	uship 27	N	Range	84	, NI	мрм,	SAN	JUA	N	County		
III. DESIGNATION OF TRA	ANSPORTE			NATU	RAL GAS							
Name of Authorized Transporter of Oi		or Condens	sale _		Address (Giv	e address to		ed copy of this		eni)		
Name of Authorized Transporter of Ca	singheed Coe		D C		130	(256)		MINGTON		<u></u>		
EP.G.	mußicari Oss		or Dry Ga	* [***	Address (Giv	e address to v		d copy of this		eni)		
If well produces oil or liquids,	Unit	Sec.	Twp.	Roe	is gas actually			INGTON	1/17			
give location of tanks.	ii	i	i i	_	'	,	1 wite	u /				
If this production is commingled with the	nat from any other	r lease or p	ool, give c	omming	ling order numb	er:						
IV. COMPLETION DATA												
Designate Type of Completion	on - (X)	Oil Well	Gas	Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Date Spudded	Date Comp	Ready to	Prod.		Total Depth			P.B.T.D.	L	1		
Elevations (DF, RKB, RT, GR, etc.)	Nome of D	1			Too Oliver							
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Perforations					Top Oil/Gas P	ay		Tubing Dep	Tubing Depth Depth Casing Shoe			
					I			Depth Casin				
	T	IRING (CASING	AND	CEMENTIN	IC PECOI		<u> </u>				
HOLE SIZE		TUBING, CASING AND CASING & TUBING SIZE]	DEPTH SET		· · · ·	24000 0514			
						DEI III DEI			SACKS CEM	ENI		
						····						
V TEST DATA AND DEOU	FOT FOR A	LOWA	B. B.									
V. TEST DATA AND REQUIDED IN THE STREET OF T								TO E		11/2		
OIL WELL (Test must be after Date First New Oil Run To Tank	Date of Test		ioaa ou a	nd must	Producing Mei				or field 24 hou	rs.) !		
	Date of Ital				t rouncing wier	июц (<i>г ю</i> м, р	штр, даз іўі,	ac.	TIN			
Length of Test	Tubing Press	Tubing Pressure						Choke Size	Choke Size			
									!			
Actual Prod. During Test	Oil - Bbls.			Water - Bbls.		-	Gas- MCF	Gas- MCF				
GAS WELL												
Actual Prod. Test - MCF/D	Length of Te	est		<u>-</u> -	Bbls. Condens	ale/MMCF		Gravity of C	ondensate			
Testing Method (pitot, back pr.)	Tubias b	ubing Pressure (Chut in)							the other than thanks and the			
puor, all print	pr.) Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size	Choke Size			
VI. OPERATOR CERTIFIC	CATE OF	COLOR	TA270-					<u> </u>		~		
I hereby certify that the rules and reg	nlations of the O	-UMPL	IANCE	ا 5	0	II CON	ISERV	ATION [אופוט	AN I		
Division have been complied with an	d that the inform	ation given	above				VOLI IV	ATION L	ا ۱۷۱۵۱۰	'IN		
is true and complete to the best of my	knowledge and	belief.	· -]	Dota	Ann=====	34	AR 22 19	000			
I so					Date	Approve	a — III	MR AA	109			
Jul. Moore	<u>-</u>				1 2 3 1 d							
Signature P. MOOC	ρ_n	201	·+		By			, cas				
Printed Name		T	ide	-	T:41 =	S	HEABAT!	SION DIS	TRICT #	3		
$\frac{3/23/89}{2}$	303/87	9-48	69		Title_							

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.