

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

Form C-104
Revised 1-1-89
See Instructions
Page 1

RECEIVED
NOV 13 1991
OIL CON. DIV

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

I. Operator: ROBERT R. CLICK
Address: SUITE 230 PECAN CREEK, 8230 MEADOW ROAD, DALLAS, TX 75231
Reason(s) for Filing (Check proper box):
New Well ☐ Change in Transporter of:
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: HODGES
Well No.: 15-E
Pool Name, Including Formation: BASIN DAKOTA
Kind of Lease: State, Federal or Fee
Lease No.: SF078432
Location: Unit Letter J, 1850 Feet From The SOUTH Line and 1570 Feet From The EAST Line
Section 27, Township 26N, Range 8W, NMPM, SAN JUAN, County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS
Name of Authorized Transporter of Oil: GIANT REFINING CO.
or Condensate ☒
Address (Give address to which approved copy of this form is to be sent): P. O. BOX 256, FARMINGTON, NM 87499-0256
Name of Authorized Transporter of Casinghead Gas: EL PASO NATURAL GAS CO.
or Dry Gas ☒
Address (Give address to which approved copy of this form is to be sent): P. O. BOX 4990, FARMINGTON, NM 87499-4990
If well produces oil or liquids, give location of tanks: Unit J, Sec. 27, Twp. 26N, Rge. 8W
Is gas actually connected? When?

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 Pay: 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 for full 24 hours.)
Date First New Oil Run To Tank: Date of Test: Producing Method (Flow, pump, gas lift, etc.):
Length of Test: Tubing Pressure: Casing Pressure: Choke Size: NOV 13 1991
Actual Prod. During Test: Oil - Bbls.: Water - Bbls.: Gas - MCF: OIL CON. DIV

GAS WELL
Actual Prod. Test - MCF/D: Length of Test: Bbls. 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: KENNETH E. RODDY, AGENT FOR ROBERT R. CLICK
Printed Name: KENNETH E. RODDY
Date: NOVEMBER 11, 1991
Telephone No.: (505) 325-5866
OIL CONSERVATION DIVISION
Date Approved: NOV 18 1991
By: [Signature]
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.
4) Separate Form C-104 must be filed for each pool in multiply completed wells.