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DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

erm C-104 evised 1-1-89

DISTRICT II P.O. Drawer DD, Artenia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088

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Casingheed Case Condensate Casingheed Case Condensate Casingheed Case	New Well	Change in Transporter of:	1					
Continue	• —	·						
Lease Name Onto "C" Government "26" Well No. Pool Name, Including Formation Bassin Fruitland Coal "		Casinghead Gas Condensate						
Lean Name	change of operator give name ad address of previous operator							
Contion "C" Government "26" 1 Basin Fruitland Coal State, Rederal or Fee M 020501 Location Unit Later M : 1285 Feet From The FSL Lise and 895 Feet From The Rest Lit Section 26 Township 29N Range 11W NMTM, San Juan Consey II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Cive address to which approved copy of this form is to be sent) Name of Authorized Transporter of Caninghead Coa or Dy Cas LX Address (Cive address to which approved copy of this form is to be sent) Name of Authorized Transporter of Caninghead Coa or Dy Cas LX Address (Cive address to which approved copy of this form is to be sent) Name of Authorized Transporter of Caninghead Coa	I. DESCRIPTION OF WELL	AND LEASE						
Loss	Lease Name 14466 Ohio "C" Government					_		
Section 26 Township 29N Range 11W NMPM, San Juan Construction II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorised Transporter of Oil □ or Condensate □ Address (Give address to which approved copy of this form is so be seet) Name of Authorised Transporter of Classinghead Gas □ or Dry Gas 区 Address (Give address to which approved copy of this form is so be seet) Name of Authorised Transporter of Classinghead Gas □ or Dry Gas 区 Address (Give address to which approved copy of this form is so be seet) Name of Authorised Transporter of Classinghead Gas □ or Dry Gas 区 Dry Gas EX Address (Give address to which approved copy of this form is so be seet) Name of Authorised Transporter of Classinghead Gas □ or Dry Gas EX Address (Give address to which approved copy of this form is so be seet) Name of Authorised Transporter of Classinghead Gas □ or Dry Gas EX Address (Give address to which approved copy of this form is so be seet) Name of Authorised Transporter of Classinghead Gas Experiment of the Seet of Transporter of Class In Class Experiment (Town approved Copy of this form is so be seet) Name of Authorised Transporter of Classinghead Gas Experiment (Town address to which approved copy of this form is so be seet) Name of Authorised Transporter of Classinghead Gas Experiment (Town address to which approved copy of this form is so be seet) Name of Authorised Transporter of Class Experiment (Town address to which approved copy of this form is so be seet) Name of Authorised Transporter of Class Experiment (Town address to which approved copy of this form is so be seet) Name of Authorised Transporter of Class Experiment (Town address to which approved copy of this form is so be seet) Name of Authorised Transporter of Class Experiment (Town address to which approved copy of this form is so be seet of Town address to which approved compared to which approved copy of this form is so be seet) Name of Authorised Transporter of Class Experiment (Town address to which approved to Town address t	Location					1		
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Name of Authorized Transporter of Oil	Section 26 Townshi	p 28N Range 11	N, NMPM,	San Ju	an		County	
Name of Authorized Transporter of Oil	II. DESIGNATION OF TRAN	SPORTER OF OIL AND NAT	URAL GAS					
Mearathon Oil Commany Page Page	Name of Authorized Transporter of Oil			ich approved	copy of this for	m is to be se	nt)	
Mearathon Oil Commany Page Page	Name of Authorized Transporter of Casin	shead Gas Or Dry Gas X	Address (Give address to wh	ich approved	copy of this for	m is to be se	nt)	
Second Total produces of the Total produces of the Total produces of tenders Unit Sec. Torp. Rgs. Is gas actually connected? When ?		297/1/	- I	• •			-	
This production is commingled with that from any other lease or pool, give commingling order number: V. COMPLETION DATA Designate Type of Completion - (X) Disa Spedded Date Compl. Rendy to Prod. 5-10-90 6-21-90 6-21-90 1650' 1632' Despite Rendy to Prod. 5-10-90 1650' 1632' Despite Rendy to Prod. 5-10-90 1650' 1632' Despite Rendy to Prod. 5-10-90 1650' 1629' P.B.T.D. 1632' Despite Rendy to Prod. 1650' 1629' Performations Fruitland Coal 1558'-65', 1604'-18' TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET 11" 8 5/8" 258' 7 7/8" 5 1/2" 1642' A33 SX 7 7/8" 5 1/2" 1642' A33 SX DEPTH SET DIL 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.) Dute Firm New Oil Run To Tank Date of Test Tubing Pressure Casing Producing Method (Flow, pump, gas lift, stc.) Casing Method (Flow, pump, gas lift, stc.) GAS WELL Actual Prod. During Test Oil - Bbls. GAS WELL Actual Prod. During Test Oil - Bbls. GAS WELL Actual Prod. During Test Oil - Bbls. GAS WELL Actual Prod. During Test Oil - Bbls. Oil - Bbls. Oil - Bbls. Oil - Bbls. Oil CONSERVATION DIVISION DEC 0 5 1990 Date Approved By SUPERVISOR DISTRICT # 3 Title Title Title Title Title Title Title Title	If well produces oil or liquids,	Unit Sec. Twp. Rg						
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12-4-90 (915) 682-1626	Printed Name	Title	11	SUPERV	ISOR DIS	HICT	3	
(Table)	12-4-90 Date	(915) 682-1626 Telephone 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.