Submit 5 Copies
Appropriate District Office
DISTRICT 1
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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe. New Mexico 87504-2088

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

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	REQI		•		LE AND	AUTHORI	ZATION				
I .			-	-		TURAL G					
								VPI No.			
Robert L. Bayless						30-039-24301					
Address											
P.O. Box 168, Farm	ningto	n, NM	87499	9		/DI					
Reason(s) for Filing (Check proper box) New Well		A i-	T	C		ner (Please expl	lain)				
	Oil	Change in	Dry Gar								
Recompletion	Casinghea	4 Co.	Condens								
I change of operator give name	- Cangilla										
and address of previous operator											
II. DESCRIPTION OF WELL	AND LE	ASE									
Lease Name			Pool Na	me, Includir	ng Formation	······································	Kind	of Lease	Leas	e No.	
Jicarilla 464		7	Eas	t Bland	co Pict	ured Cli	ffs State,	Federal or Fee	Jic.Cor	nt. 464	
Location								Indian			
Unit LetterD	<u>: 1</u>	190	Feet Fro	om The no	orth Li	ne and $\frac{119}{}$	00 Fe	et From The	west	Line	
Section 29 Township	30	N	Range	3W	, <u>N</u>	IMPM,	Rio	Arriba		County	
DESIGNATION OF TRANS	CDADTE	7D OF O	II ABII	n Matri	DAT CAS	ı					
III. DESIGNATION OF TRANSPORTER OF OIL AND NATUI Name of Authorized Transporter of Oil						Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas or Dry Gas X						Address (Give address to which approved copy of this form is to be sent)					
Robert L. Bayless	•		•		· ·	Box 168					
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge.		lly connected?	When				
give location of tanks.	<u> </u>	<u>İ</u>	<u> </u>	1		yes	L	2/17	/89		
If this production is commingled with that i	rom any ot	her lease or	pool, giv	e commingi	ing order nun	nber:					
IV. COMPLETION DATA			,			_,	_,		 ,-		
Designate Type of Completion	- (20)	Oil Well	10	Gas Well	•	Workover	Deepen	Plug Back Sa	ıme Res'v	Diff Resiv	
Date Spudded		ipl. Ready to	Dend.	X	X Total Depth	<u> </u>			1		
11/26/88	i	1/25/89			I COLL DOPA	4215'		P.B.T.D.	4116'		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
7238' GL 7250' RKB	•				3815'			3868'			
Perforations Perforations	1 . 10	turcu c	<u> </u>	<u> </u>	<u> </u>			Depth Casing S			
								1			
		TUBING,	CASI	NG AND	CEMENT	ING RECO	RD				
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT				
12 1/4"					139'			130 sx Class B (153 ft ³			
7 7/8"		4	1/2"		4176'			200 sx Class B (412 fr ³			
											
		I V V ASSU			<u> </u>						
V. TEST DATA AND REQUES						4.		·	£ !! 34 L	1	
OIL WELL (Test must be after r. Date First New Oil Run To Tank	Date of T		of 1004 (ou ana musi		Method (Flow, p			Juli 24 hours.		
Date First New Oil Run 10 12th	Date of 1	c <i>s</i> r			1 roddeing it	viculou (1°10W,)		TERE	IVE	1	
Length of Test	Tubing Pr	MEGITE			Casing Pres	sure	17	Choke Size	8 0 4	113	
	Tubing Flessure				U\			u ===00	a 40 06		
Actual Prod. During Test	Oil - Bbls	 i.			Water - Bbls.			GaFEB2 3 1989			
_								OIL CO	N. DN	y	
GAS WELL								-		Jet	
Actual Prod. Test - MCF/D	Length of	Test			Bbls. Conde	ensate/MMCF		Gravity DIS	and the		
2428	3 hrs.			-0-			N/A				
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size				
Back Pressure Test	1095			1100			3/4"				
VI. OPERATOR CERTIFIC	ATE O			NCE							
I hereby certify that the rules and regul						OIL CO	NSERV	ATION D	IVISIO	1	
Division have been complied with and	that the infe	ormation giv		•							
is true and complete to the best of my	mowledge	and belief.			Dat	e Annrovi	ed	MΔR	A 1 100	10	
-02-772-						Date Approved MAR 0 1 1989					
_ m / Sky -						Original Signed by FRANK Y. CHAVEZ					
Signature Poulogo	_	Λ			By_		······································				
Robert L. Bayless Printed Name		Opera	tor Title			_		الإزاع	ergrede diet	RICT SE	
2/22/89		505/3		59	Title	d					
Date		Tele	ephone N	lo.	11						

- 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.