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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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

	101	HANSPO	HI UIL	AND NATURA	<u> </u>	Well API	No.			
erator			300456007300							
MOCO PRODUCTION COMPAI	NI									
.o. BOX 800, DENVER,	COLORADO 8	0201		Other (Plea	se explain)					
ason(s) for Filing (Check proper box)	Chan	ge in Transport	er of:	لسا تصنعت التا						
w Well U	Oil	Dry Gas	닏							
ange in Operator	Casinghead Gas	Condens	ale							
hange of operator give name address of previous operator										
DESCRIPTION OF WELL	AND LEASE					T20.07			ase No.	
ase Name OORE LS	Well 6	No. Pool Na BLAN	me, Includir CO MES	ng Formation AVERDE (PROF	ATED G	Kind of ASState, Fe	Lease deral or Fee			
Ocation K Unit Letter	1460	Feet Fro	en The	FSL Line and _	1750	Feet	From The _	FWL	Line	
25	32N	D	12W	, NMPM,		SAN	JUAN		County	
Section Townshi	ip	Range								
I. DESIGNATION OF TRAN	SPORTER O	F OIL AN	D NATU	RAL GAS Address (Give addr	es to which	approved C	opy of this fo	rm is to be se	nt)	
ame of Authorized Transporter of Oil	□ or C	Condensate		SESE BACT	опти ст	DEET	FARMING	TON_NM	87401	
ERIDIAN OIL INC.	anhand Can	or Dry	Gas [Address (Give addr	ess to which	approved o	opy of this fo	vm is to be se	nt)	
ame of Authorized Transporter of Casin	MDANV		~~·	P.O. BOX 14						
EL PASO NATURAL GAS CO well produces oil or liquids,	Unit Sec	Twp.	Rge.	ls gas actually conn	ected?	When 1	1			
ve kocation of tanks.		l	ا ــــــــــــــــــــــــــــــــــــ	<u> </u>						
this production is commingled with that	t from any other le	ase or pool, giv	e comming	ling onser number:						
V. COMPLETION DATA			Gas Well		kover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion		, wen } '	77 VII	Total Depth	i_	i		L		
Date Spudded	To D. I. D. du La Drod						P.B.T.D.			
				Top Oil/Gas Pay			Tubing Depth			
Elevations (DF, RKB, RT, GR, etc.)	stions (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Olivons 1 = 7			I would be had		
	1									
				.1			Depth Casis	ili Zjioe		
erforations							Depth Casis	ig Shoe		
'erforations	TUI	BING, CASI	NG AND	CEMENTING	RECORD				JENT	
	TUI	BING, CASI	NG AND) CEMENTING DEF	RECORD TH SET	WE		SACKS CEA	MENT	
erforations HOLE SIZE	TUI	BING, CASI IG & TUBING	NG AND	THE BE	CEI	AB			MENT	
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HOLE SIZE	CASIN	IG & TUBING	SIZE	DEF	CEI	1990	0	SACKS CEA		
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HOLE SIZE	CASIN	IG & TUBING	SIZE	THE BE	UG23	1990 1990	depth or be	SACKS CEA		
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HOLE SIZE V. TEST DATA AND REQUI	EST FOR AL	LOWABLE	SIZE	Producing Methox Casing Pressure	UG23	1990 1990	choke Size	SACKS CEN		
HOLE SIZE V. TEST DATA AND REQUIOIL WELL Test must be after Date First New Oil Rua To Tank	EST FOR AL or recovery of total Date of Test	LOWABLE	SIZE	be equal to a Producing Methox	UG23	1990 1990	s depth or be	SACKS CEN		
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HOLE SIZE V. TEST DATA AND REQUIOIL WELL Test must be after Date First New Oil Run To Tank Length of Test	EST FOR AL or recovery of total Date of Test Tubing Press	LOWABLE volume of load	SIZE	Producing Methox Casing Pressure Water - Bbls.	UG23	1990 1990	choke Size	SACKS CEN		
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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.