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Appropriate District Office
DISTRICT I P.O. Box 1980, Hobbs, NM 88240

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

## State of New Mexico En. \_\_\_\_\_, Minerals and Natural Resources Department

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MAY - 6 1991

Form C-104 Revised 1-1-89 e Instructions

## **OIL CONSERVATION DIVISION**

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

O. C. D. ARTESIA, OFFICE

ISTRICT III	ARTESIA, OFFICE											
00 Rio Brazos Rd., Aztec, NM 87410	REQL	JEST FO	)Ĥ A	LLOWAE	SLE AND A	AUTHORIZ						
		TO TRA	NSP	ORT OIL	AND NAT	TURAL GA						
erator							l v	Vell A	Pl No.			
<u>Frostman Oil Corporat</u> Idress	ion/							3	0-005-60	)254		
P O Drawer W, Artesia	NM	88211-0	0629	)	- OI	<b>(b)</b>	. ;					
ason(s) for Filing (Check proper box)		Change in	Tenere	arter of:	L) Out	x (Please expla	iui)					
ew Well	Oil	Change in	Dry G	F-7								
hange in Operator	Casinghea		Conde									
change of operator give name d address of previous operator Bison	<u>-</u>				5809 S.	Westerr	ı #20	0,	Amarill	o. TX 7	9110	
DESCRIPTION OF WELL A			-								•	
case Name		Well No.	Pool 1	Vame, Includi	ng Formation				Lease		ase No.	
Falgout Federal		2	Dou	ble L C	ueen Ass	sociated	^2	State,	rederal & Fe	NM-04	93690	
ocation	_			_		3.4						
Unit LetterG	:	1980	Feet F	from The $\frac{1}{\sqrt{1000}}$	Jorth Lin	e and	550	Fo	et From The .	East	Line	
Section 26 Township	]	145	Range	29	)E <b>, N</b> I	мрм,	Chav	res		<u></u>	County	
I. DESIGNATION OF TRANS	ed/\DTT	ED OF O	T A P	UD NATTI	DAI CAS							
1. DESIGNATION OF TRANS lame of Authorized Transporter of Oil	or Condensate				Address (Give address to which approved				copy of this f	orm is to be st	int)	
					44							
larne of Authorized Transporter of Casing			or Dr	y Gas XXX	t	e address to w		- 1				
The Maple Gas Corpora well produces oil or liquids,	tion Unit	Sec.	Twp.	Rge.	Y	ole Aveni y connected?		When		<u> </u>	0204	
ve location of tanks.		<u> </u>			yes	-	i		1	/75		
this production is commingled with that f	rom any of	her lease or	pool, g	ive comming	ling order num	ber:						
V. COMPLETION DATA		10::31::		Con Wall	N W	Wada	1 1		Diver Deal-	Come Deale	Dist Barbe	
Designate Type of Completion -	· (X)	Oil Well	 	Gas Well	New Well	Workover	1 2000	pen	LING DUCK	Same Res'v	Diff Res'v	
Pate Spudded		npl. Ready to	Prod.		Total Depth	1	.L		P.B.T.D.	<u> </u>		
•												
levations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay				Tubing Depth			
erforations									Depth Casing Shoe			
Ellorations												
		TUBING	CAS	ING AND	CEMENTI	NG RECOR	SD		<del> </del>			
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET				SACKS CEMENT			
									ļ			
					<del> </del>	<del></del>			<b> </b>			
	<del> </del>	<del></del>		<del></del>			· · · · · · · · · · · · · · · · · · ·					
. TEST DATA AND REQUES	TFOR	ALLOW	ABL	E			<del></del>		<u> </u>			
OIL WELL (Test must be after r	ecovery of	total volume	of loa	 d oil and mus	it be equal to o	r exceed top al	iowable	for th	s depth or be	for full 24 ho	urs.)	
Date First New Oil Run To Tank	Date of T					lethod (Flow, p			elc.)			
					0 : 5					post &	7 77	
Length of Test	Tubing Pressure				Casing Pressure				Choice Size	• 5-10	- 9/	
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gas- MCF	Chg	OP		
Actual Floor During Foot	Oil - Bui							y				
GAS WELL												
Actual Prod. Test - MCF/D	Length o	of Test			Bbls. Conde	ensate/MMCF			Gravity of	Condensate		
	<b></b>					Casing Pressure (Shut-in)				Choke Size		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Liceanic (Sinc-in)							
VL OPERATOR CERTIFIC	⊥ 'ATF €	)F COM	PLIA	ANCE		<b>5</b> 11 <b>5 5</b>					<b>~</b>	
I hereby certify that the rules and regu	lations of t	the Oil Conse	ervatio	Ω		OIL CO	NSE	:HV	AHON	DIVISI	ON	
Division have been complied with and that the information given above									MAY 8 1991			
is true and complete to the best of my	knowledge	and belief.			∥ Dat	te Approv	ed _		MAY	0 1201		
( , 7 - 1-												
Single State					∥ By.				SNED BY	·		
Signature Jackie Forister	Pro	oduction					E WIL					
Printed Name		746-	Tid 3344	-	Title	eSUP	'ERVI	SUR	DISTRIC	)[		
5/02/91 Date			lephon									

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.