ISTRICT II
O. Drawer DD, Antesia, NM 88210

ISTRICT III 000 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

NOV 19'90

RECEIVED

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

a181

O. C. O.
ARTESIA, OBICET W

REQUEST FOR ALLOWABLE AND AUTHORIZATION

•	TO TE	RANSPORT	OIL AND NATURAL GAS	
pentor ZiA Entero	1.2' /	/		Well API No.
iddress	<u>) 17505 V</u>		d	
eason(s) for Filing (Check proper box)	3 Arto	SIA X	111 8871€ □ Other (Please explain)	
lew Well	Change	in Transporter of:		
ecompletion	Oil	Dry Gas		
hange in Operator	Casinghead Gas	Condensate		
change of operator give name ad address of previous operator				
. DESCRIPTION OF WELL				
eage Name MARLISHE Gue. contion	7	O. Pool Name, In	cluding Formation 4 (LUCCA) H550	Kind of Lease State, Federal or Fee Lease No.
Unit Letter <u>B</u>	_:_ <i>1155</i>	Feet From The	e North Line and 3/45	Feet From The EAST Line
Section 74 Towns	hip /4 -5	Range 39-	E, NMPM, CAA	County
I. DESIGNATION OF TRA	C			
lame of Authorized Transporter of Oil	or Con	dentate	11	approved copy of this form is to be sent) A. A. C. A. A. M. 484115
lame of Authorized Transporter of Casi	nghead Gas	or Dry Gas	Address (Give address to which	approved copy of this form is to be sent)
Sand and the limite	1 Hair Con	Twp.	Dec le see establica estable	1 110 2
well produces oil or liquids, ve location of tanks.	Unit Sec.	114 36	Rge. Is gas actually connected?	When ?
this production is commingled with that /. COMPLETION DATA	t from any other lease	or pool, give com	mingling order number:	
Designate Type of Completion	n - (X)	/ell Gas We	il New Well Workover i	Deepen Plug Back Same Res'v Diff Res'v
late Spudded	Date Compl. Ready to Prod.		Total Depth	P.B.T.D.
levations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay	Tubing Depth
erforations				Depth Casing Shoe
	·			
			ND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET	SACKS CEMENT
TOTAL AND DECLE	SOM FOR ALLO	WADIE		
. TEST DATA AND REQUE IL WELL (Test must be after	ST FOR ALLO	W ABLE me of load oil and	must be equal to or exceed top allowal	ble for this depth or be for full 24 hows.)
ate First New Oil Run To Tank	Date of Test	72	Producing Method (Flow, pump,	
ength of Tect	Tubing Pressure		Casing Pressure	Choke Size
ength of Test	Inoing I tenorie			
ctual Prod. During Test	Oil - Bbis.		Waler - Bbls.	Gas- MCF
SAS WELL				
ctual Prod. Test - MCF/D	Length of Test		Bbls. Condensate/MMCF	Gravity of Condensate
sting Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)	Choke Size
I. OPERATOR CERTIFIC	CATE OF CON	MPLIANCE	OII CONO	ERVATION DIVISION
I hereby certify that the rules and reg	ulations of the Oil Cor	nservation	OIL CONS	ELAVITON DIAION
Division have been complied with an is true and complete to the best of m	d that the information y knowledge and belie	given above f.	Data Assessed	Λ I
	,		Date Approved	- Wall
(Pall bour dba	ZiA Cotor	Dirises	By	a Voc
Signature () E ()		1000 0	By	L NEW YORK
Printed Name	JONES	Title	Title	
11-15-90	505.74	C C/CC		

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.

ctions of this form must be filled out for allowable on new and recompleted wells.

at only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.

Form C-104 must be filed for each pool in multiply completed wells.