bibmit 5 Copies Spropriate District Office STRICTJ O. Box 1980, Hobbs, NM 88240		lew Mexico tural Resources Department	Loren C-Jos Restord 1-1-89 See Instructions
ISIRICT II O. Drawer DD, Anesia, NM 88210	N 2 4 1992 CONSERVA	ATION DIVISION	et Bottom of Page
	D. C. D. Santa Fe, New M	lexico 87504-2088	
	REQUEST FOR ALLOWA	BLE AND AUTHORIZAT L AND NATURAL GAS	ION
perator KAyJAY A	Dil Co.		Well API He
Vidress 885 E		HAGERMAN N	<u>30-015-03898</u>
rason(s) for Filing (Check proper box)	Change in Transporter of:	Other (Please explain)	M 88232
hange in Operator	Oil Dry Gas		
change of operator give name	Caninghead Gas Condensate	POR+ 1306 A	desig NM 88210
I. DESCRIPTION OF WELL	/	, <u></u> , <u></u>	
S.W. Henshaw	Well No. Pool Name, Includ 7 S.W. Hensh	•	Kind of Lease No. State, Federal of Fee MM 0560 379
Unit Letter	Feet From The	Line and <u>1980</u>	Feet From The Line
Section 17 Townsh	nip 16-5 Range 30-	E, NMPM, EDDY	N m County
II. DESIGNATION OF TRAJ	NSPORTER OF OIL AND NATU		nproved copy of this form is to be sent)
lame of Authorized Transporter of Casi	nghead Gas or Dry Gas	Address (Give address to which a	Phresia NM pproved copy of this form is to be sent)
well produces oil or liquids, we location of tanks.		Is gas actually connected?	When ?
this production is commingled with that V. COMPLETION DATA	F 17 16-5 30-e		
Designate Type of Completion	Oil Well Gan Well	New Well Workover De	eepen Flug Back Same Res'v Diff Res'v
bite 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
riforations		<u> </u>	Depth Casing Shoe
	TUBING, CASING AND	CEMENTING DECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
. TEST DATA AND REQUE IL WELL (Test must be after	ST FOR ALLOWABLE 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)
He First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, g	as lift, etc.)
ngth of Test	Tubing Pressure	Casing Pressure	Choke Size Posted ID-3 7-31-92
tual Frod. During Test	Oil - Bbis.	Water - Bbls.	Gas MCF ling of
AS WELL	- I	L]
ctual Prod. Test - MCF/D	Length of Test	Bbla. Condensate/MMICF	Gravity of Condensate
ting Method (pilol, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut in)	Choke Size
I. OPERATOR CERTIFICATE OF COMPLIANCE		OIL CONSERVATION DIVISION	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.		Date Approved JUL 2 9 1992	
M.D.	The strength and belief.	Date Approved	JUL Z 9 1992
Signature D	Tute :	ByORIGINAL	SIGNED BY
Printed Name FRED G Doves Owner Title		ORIGINAL SIGNED BY MIKE WILLIAMS Title SUPERVISOR, DISTRICT IF	
<u>6-22-92</u> Date	505-752-3354 Telephone No.		
	af far farma have a subserve of weeks and a subserve have a subserve he had beek a subserve he subserve he had		

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 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.
- Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 Separate Form C-104 must be filed for each pool in multiply completed wells.