Submit 5 Copies
Appropriate District Office
DISTRICT!
P.O. Box 1980, Hobbs, NM 88240

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

State of New Mexico Energy, Minerals and Natural Resources Department

, Minerals and Natural Resources Department

AUG 76 90

RECEMMED

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

OL C. D.

OIL CONSERVATION DIVISION

Date Approved ____AUG 3 1 1990

MIKE WILLIAMS

CINCINAL SIGNED BY

SUPERVISOR, DISTRICT IT

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Well API No Operator Evergreen Operating Corporation 🗸 30-015-87360 Address 1000 Writer Square, 1512 Larimer Street, Denver, Colorado 80202
Reason(s) for Filing (Check proper box)
Other (Please explain) Change in Transporter of: New Well Dry Gas Recompletion Casinghead Gas Condensate X Change in Operator If change of operator give name and address of previous operator Penroc Oil Corporation, P.O. Box 5970, Hobbs, NM 88241 II. DESCRIPTION OF WELL AND LEASE Lease No. Kind of Lease Well No. Pool Name, Including Formation Lease Name State Federal or Fee 04421 13 Square Lake GB-SA North NE Square Lake Premier Unit Location Feet From The N Line and 1,980 660 Feet From The ___ Unit Letter Eddy County 31E 165 , NMPM, Range Township Section III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) or Condensate Name of Authorized Transporter of Oil Navajo Refining Company, Pipeline Division Drawer 159, Artesia, NM 88210 Address (Give address to which approved copy of this form is to be sent) or Dry Gas Name of Authorized Transporter of Casinghead Gas \square Bartlesville, OK 74004 Phillips Building, Phillips 66 Natural Gas Company | Sec. | Twp. | 10 | 16S | 31E Twp. Rge. Is gas actually connected? When? Unit C If well produces oil or liquids, If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Plug Back Same Res'v Diff Res'v Gas Well New Well Workover Oil Well Deepen Designate Type of Completion - (X) Total Depth P.B.T.D. Date Compl. Ready to Prod. Date Spudded Top Oil/Gas Pay Tubing Depth Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe Perforations TUBING, CASING AND CEMENTING RECORD SACKS CEMENT CASING & TUBING SIZE **DEPTH SET HOLE SIZE** V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after 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.) Producing Method (Flow, pump, gas lift, etc.) Date First New Oil Run To Tank Date of Test Casing Pressure Length of Test Tubing Pressure Water - Bbis. Actual Prod. During Test Oil - Bbls. GAS WELL Bbls. Condensate/MMCF Gravity of Condensate Length of Test Actual Prod. Test - MCF/D Choke Size Casing Pressure (Shut-in) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.)

VI. OPERATOR CERTIFICATE OF COMPLIANCE

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.

Signature Floyd Trujillo

1990

Printed Name

<u>July 30.</u>

- 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.

Production Supervisor

Title

(303) 534-0400

Telephone No.

- 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.