, RE(	CEIVED			1
DISTRICT II			ral Resources Department	Form C-104 Revised 1-1-89 See Instructions at Bottom of the
	SIA, OFFICE San		xico 87504-2088	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410	REQUEST FO		LE AND AUTHORIZAT	transporter Gas
I. Operator		NSPORT OIL	AND NATURAL GAS	Well API No.
RB Operating Company Address	,			
2412 N. Grandview, S Reason(s) for Filing (Check proper box)	<u>uite 201, C</u>	<u>dessa, Texa</u>	as 79761 Other (Please explain)	
New Well		Transporter of:		
Change in Operator	_	Dry Gas	Effective June	1, 1989
If change of operator give name			2/12 N Crandwice	, Suite 201, Odessa, Tx. 7976
• •		cioieum co.	, 2412 N. GLANOVIEN	, Suite 201, Odessa, 1x. 7976
II. DESCRIPTION OF WELL A		Pool Name, Includir	ng Formation	Kind of Lease Lease No.
State 647 AC 724	203	-	ueen Grayburg SA	State, Federal or Fee 647
Location	220	a	.1	_
Unit LetterP	:330	Feet From The <u>S</u>	outh Line and <u>330</u>	Feet From TheLine
Section 25 Township	175	Range 23	8 <u>E</u> , <b>NMPM</b> , Eddy	County
III. DESIGNATION OF TRANS	SPORTER OF OF	I. AND NATH	RAL GAS	
Name of Authorized Transporter of Oil	X or Condens			pproved copy of this form is to be sent)
Navajo Refining Compa		e Division	P.O. Drawer 159,	Artesia, New Mexico 88210
Name of Authorized Transporter of Casing Phillips Petroleum Co		or Dry Gas		pproved copy of this form is to be sent) essa, Texas 79762
If well produces oil or liquids,		Twp. Rge.	is gas actually connected?	When ?
give location of tanks.	E 36	17 28	Yes	12/16/63
If this production is commingled with that f IV. COMPLETION DATA	rom any other lease or p	ool, give commingli	ing order number:	
Designate Type of Completion .	Oil Well	Gas Well	New Well Workover D	eepen Plug Back Same Res'v Diff Res'v
Date Spudded	Date Compl. Ready to	Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing For	mation	Top Oil/Gas Pay	Tubing Depth
Perforations			Depth Casing Shoe	
	TUBING,	CASING AND	CEMENTING RECORD	
HOLE SIZE	CASING & TU		DEPTH SET	SACKS CEMENT
	ecovery of total volume of			e for this depth or be for full 24 hours.)
Date First New Oil Run To Tank	Date of Test		Producing Method (Flow, pump,	gas 191, elc.) KD 29
Length of Test	Tubing Pressure		Casing Pressure	Choke Size Ind 20 1 Mg
Actual Prod. During Test	Oil - Bbls.		Water - Bbis.	Gas-MCF Republic p
GAS WELL Actual Prod. Test - MCF/D	Length of Test		Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-	-in)	Casing Pressure (Shut-in)	Choke Size
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.			OIL CONSERVATION DIVISION Date Approved0CT 2 0 1989	
Signature			By ORIGINAL SIGNED BY	
Larry Rampéy Vice President Printed Name Title			Title	
June 21, 1989 (918) 492–0447 Date Telephone No.				
INSTRUCTIONS: This for	n is to be filed in c	ompliance 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.
- 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.