NO, OF COPIES RECEIVED			·
DISTRIBUTION		ISERVATION COMMISSION	Form C-104 Supersedes Old C-104 and C-110
SANTA FE		R ALLOWABLE	Effective 1-1-65
FILE		PORT OIL AND NATURAL GAS	
U.S.G.S.	JUN 11 1986	OKT OF AND NATORAL GAS	
OIL V	3011 11 1300	1	•
TRANSPORTER GAS	O. C. D.		
OPERATOR	ARTESIA, OFFICE	1	
PRORATION OFFICE			
Operator Supplies to the Column of the Colum			
R.P.M. ENERGY V			
P.O. BOX 1207	BIG SPRING, TEXAS 797	21	
Reason(s) for filing (Check proper box)	_	Other (Please explain)	
New Well	Change in Transporter of: Oil X Dry Gas		
Recompletion Change in Ownership	Casinghead Gas Condense	ate 🔲	
Change in Ownership			
If change of ownership give name and address of previous owner		•	
DESCRIPTION OF WELL AND	Well No. Pool Name, Including Form	mation Kind of Lease	Lease No.
Lease Name	2 undesignated	san andresState, Federal o	FF STATE 4853
STATE	1 9 dildesignates	3411 4110104	
	650 Feet From The FAST Line	and 23] (). Feet From The	SOUTH
Unit Letter U			
Line of Section 16 To	waship 165 Range 26E	AST , NMPM, EDDY	County
	mon on our AND NATURAL CAS		
Name of Authorized Transporter of Oil	TER OF OIL AND NATURAL GAS	Address (Give address to which approve	copy of this form is to be sent)
KOCK SERVICES INC	1	P.O. BOX 1558 BRECKENRIDGE TX 76024	
Name of Authorized Transporter of Ca	singhead Gas or Dry Gas	Address (Give address to which approve	d copy of this form is to be sent)
		Is any actually connected? When	
If well produces oil or liquids,		Is gas actually connected? When	
give location of tanks.	. J 16 16S 26E		
	ith that from any other lease or pool, g	ive commingling order number:	
COMPLETION DATA			
	O.:	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'y.
Besignate Type of Completi	on – (X)		
	O.:	New Well Workover Deepen Total Depth	Plug Back Same Res'v. Diff. Res'v.
Besignate Type of Completi	on - (X) Date Compl. Ready to Prod.		
Besignate Type of Completi	on – (X)	Total Depth	P.B.T.D. Tubing Depth
Designate Type of Completi	on - (X) Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Designate Type of Completi Date Spudded Elevations (DF, RKB, RT, GR, etc.;	On — (X) Date Compl. Ready to Prod. Name of Producing Formation	Total Depth Top Oil/Gas Pay	P.B.T.D. Tubing Depth
Date Spudded Elevations (DF, RKB, RT, GR, etc.;	On - (X) Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AND	Total Depth Top Oil/Gas Pay CEMENTING RECORD	P.B.T.D. Tubing Depth Depth Casing Shoe
Designate Type of Completi Date Spudded Elevations (DF, RKB, RT, GR, etc.;	On — (X) Date Compl. Ready to Prod. Name of Producing Formation	Total Depth Top Oil/Gas Pay	P.B.T.D. Tubing Depth Depth Cosing Shoe SACKS CEMENT
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Designate Type of Completi Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations	Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AND CASING & TUBING SIZE	Total Depth Top Oil/Gas Pay CEMENTING RECORD DEPTH SET	P.B.T.D. Tubing Depth Depth Ossing Shoe SACKS CEMENT Post ID-3 6-13-86 Chg LT: PER
Designate Type of Completi Date Spudded Elevations (DF, RKB, RT, GR, etc.) Perforations HOLE SIZE	Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING, AND CASING & TUBING SIZE	Total Depth Top Oil/Gas Pay CEMENTING RECORD DEPTH SET ter recovery of total volume of load oil a	P.B.T.D. Tubing Depth Depth Offing Shoe SACKS CEMENT Post ID-3 6-13-86 Chg LT: PER
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If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111. All sections of this form must be filled out completely for sllow-able on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

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

SECUVIDADE SECULATION O O O SECULATION