Submit 5 Copies Appropriate District Office DISTRICT J P.O. Box 1980, Hobbs, NM 88240	Energy, Minerals and	of New Mexico I Natural Resources Department	Form C-104 Revised 1-1-89 RECEIVED Bottom of Page
<u>DISTRICT II</u> P.O. Drawer DD, Artesia, NM 8821		VATION DIVISION D. Box 2088	-
DISTRICT III	Santa Fe, Nev	w Mexico 87504-2088	MAR 2 7 1991
000 Rio Brazos Rd., Aziec, NM 8	HEQUEST FOR ALLO	WABLE AND AUTHORIZATIC	O. C. D. DN ARTESIA, CIFICI
Opennor Beach Explorat:			/ell API No.
Address			30-015-24016
Reason(s) for Filing (Check proper	ld Ste. 200 Midland, Texa	as 79701 Other (Please explain)	
New Well	Change in Transporter of		
Recompletion	Oil Dry Gas Casinghead Gas Condensate	☐ Name Change due ☐ Waterflood proje	to Unitization for ect. Government #5
change of operator give name ad address of previous operator			
DESCRIPTION OF WE	TI. AND I FASE		
case Name	Well No. Pool Name, In	cluding Formation	ind of Lease No.
Red Lake Uni	t 12 Red La	-	ate, Federal or Fee
Unit LetterI	: <u>1650</u> Feet From The	e South Line and990	Feet From TheEast Line
Section 25 Tow	vnship 16S Range	28E , NMPM,	Fddy
		/ VIVIE 1V1,	County County
1. DESIGNATION OF TR ame of Authorized Transporter of C	CANSPORTER OF OIL AND NA	TURAL GAS Address (Give address to which appro	
Permian SCURLO	CK PERMIAN CORP EFF 9-1-91	P.O. Box 1183 Housto	on, Texas
ame of Authorized Transporter of C	Casinghead Gas Dry Gas	Address (Give address to which appro	wed copy of this form is to be sent)
well produces oil or liquids,		Rge. Is gas actually connected? W	hen ?
ve location of tanks.	that from any other lease or pool, give comm	<u>BE</u>	
. COMPLETION DATA	that from any other lease or pool, give comm	ningling order number:	
	Oil Well Gas We		
Designate Type of Complet	tion - (X)	II New Well Workover Deepe	n Plug Back Same Res'v Diff Res'v
Designate Type of Complet	Date Compl. Ready to Prod.	II New Well Workover Deepe Total Depth	Plug Back Same Res'v Diff Res'v P.B.T.D.
ate Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
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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.
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.