

Submit 3 Copies  
Appropriate District Office  
DISTRICT I  
P.O. Box 1910, Hobbs, NM 88240

DISTRICT II  
P.O. District DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brisos Rd., Aztec, NM 87410

RECEIVED

State of New Mexico  
Energy, Minerals and Natural Resources Department

JUL 24 '89

OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

Santa Fe		
File		
Transporter	Oil	
Operator	Gas	

O. C. D.  
ARTESIA REQUEST

REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS

I. Operator Read & Stevens, Inc. Well API No. 30-015-24560

Address P.O. Box 1518, Roswell, NM 88202

Reason(s) for Filing (Check proper box) ☒ Other (Please explain) Was Getty Mesa #2, #E-5668  
New Well ☐ Change in Transporter of: ☐ Dry Gas ☐  
Recompletion ☐ Oil ☐ Casinghead Gas ☐ Condensate ☐  
Change in Operator ☐

If change of operator give name  
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>BHWFU</u>	Well No. <u>11</u>	Pool Name, including Formation <u>Bunker Hill Penrose Acro</u>	Kind of Lease <u>State, Redaction Per X</u>	Lease No.
Location Unit Lease <u>J</u> <u>1980</u> Feet From The <u>S</u> Line and <u>1980</u> Feet From The <u>E</u> Line Section <u>14</u> Township <u>16S</u> Range <u>31E</u> <u>NMPM</u> Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When?

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	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 Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			

TUBING, CASING AND CEMENTING RECORD

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT

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.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

*POST ID-3  
1-25-89  
Jag null mark*

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MCF	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.

Signature John C. Maxey, Jr.  
Printed Name John C. Maxey, Jr. Title Petroleum Engineer  
Date 5-30-89 Telephone No. 505/622-3770

OIL CONSERVATION DIVISION

Date Approved JUL 25 1989

By ORIGINAL SIGNED BY  
MIKE WILLIAMS  
Title SUPERVISOR, DISTRICT II

INSTRUCTIONS: This form is to be filed in compliance 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.
- 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.