ubmit 5 Copies
ppropriate District Office
ISTRICT P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resourc Department

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

OIL CONSERVATION DIVISION P.O. Box 2088 P.O. Box 2088

MAR 2 3 1992

DISTRICT II

P.O. Diswel DD, Alwand 1991		Santa	Fe, N	lew Me	xico 87504	1-2088	•	c 0		
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM \$7410	REQUE	ST FOR	ALL	OWAB	LE AND A	UTHORIZ	ATIONEY	C. D. M. OFFICE		
I.	AT OIL	TAN CNA	UNAL UA	Mell ✓	API No.					
Openior LBO New Mexico,	ico, Inc.					N/A				
28202 Cabot Rd.	, Ste.	250,	Lag	una N	iguel,	CA 9267	77			
Reason(s) for Filing (Check proper box)		: . T-		- AC	Othe	r (Please expla	in)	2 A	,	
New Well Change in Transporter of Change in Tr										
Recompletion	Casinghead			u 🗔				//		
Charge is opinion.					Midland	a mv				
and address of previous operator			s co	<u>rp., </u>	Midland	\ <u></u>				
II. DESCRIPTION OF WELL Lease Name	Ţ,	Well No. P	ool Nan	ne, încludi	ng Formulon		Kind o	Chance Poderal or Pod	LC028	2 0 0 2 o
G-J Unit Tract	8	1	Gra	aybur	g-Jacks	on-SR-C	-GFSAN		100020)))] [
Location	. 990	_	_	_ S	outh Lm	. 330)	ol From The .	East	ı
Unit Letter	-:	F	set From	n The 🗀	Udon Line	100	<u></u> re	K From the		
Section 23 Township	p 17	-S R	ange	30-	E , NN	IPM, EC	ldy			Count
III. DESIGNATION OF TRAN		OF OIL		NATU	RAL GAS					
Name of Authorized Transporter of Oil Navajo Refining Comp		Give address to which approved copy of the form is to be send. Box 159, Artesia, NM 88210								
Navajorei Ining Comp	od II y	X °	r Dry C		: Address (Give					
Phillips Petroleum	•			*'		. Penbr				
If well produces oil or liquids, give location of tanks.	Umi		√ր 17s	Rge 30E	lightiamily Yes	connected?	When 19	1 945		
If this production is commungled with that IV. COMPLETION DATA				comm.ng.	ing order numb	er N	/A			·
Designate Type of Completion	. (X)	Oil Well	G	ış Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Din Re
Date Spudded		. Ready to P	rod.		Total Depth	<u> </u>	<u> </u>	P.B.T.D.	<u> </u>	
Elevauons (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil Gas Pay			Tubing Depth		
Perforations							Depth Casing Shoe			
		· · · · · · · · · · · · · · · · · · ·	·				· · · · · · · · · · · · · · · · · · ·	Deput Cash	18 240e	
HOLE SIZE	TUBING, CASING AND C									
Note Size	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT		
· · · · · · · · · · · · · · · · · · ·										
						· · · · · · · · · · · · · · · · · · ·	···	 		
V. TEST DATA AND REQUES OIL WELL Cost must be after to										
OIL WELL Test must be after re Date First New Oil Run To Tank	Date of Test	yorung of	1003 04	310 mJ	Producing Me	whood (Flow, pu	mp, gas lýi, e	depih or be. ic.)	for full 24 hou	<i>ys</i>)
									Destin	Pto-3
Length of Tex	Tubing Pressure				Casing Pressure			Choke Size 1 4-5-92		
Actual Prod. During Test	Oil + Bbls.				Water - Bbis			Ou. MCF Edg OF		
GAS WELL	<u> </u>	-	· · · · · ·					1		
Actual Prod. Test - MCF/D	Length of Test				Bois Condensate/MMCF			Gravity of Condensate		
Tesung Method (pilot, back pr.)	Tubing Pressure (Shui-in)			 -	Casing Pressure (Shui-in)			Choke Size		
VI. OPERATOR CERTIFIC	ATE OF	COMDI	IANI		1	· · · · · · · · · · · · · · · · · · ·	· ·····	-		
VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation					OIL CONSERVATION DIVISION					
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.										
To all oca of my	MONICUSE AN	u vener.			Date	Approved	d			
Raymond A. Diaz, President					By					
Printed Name Title					Title					
3/17/92 (714)365-0100 Date Telephone No.										

- 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 accordar
- 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.