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Appropriate District Office
DISTRICT I
1.O. Box 1980, Hobbs, NM 88240

State of New Mexico EL. 69, Minerals and Natural Resources Department

RECEIVED

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

DISTRICT II
1.0. Drawer DD, Artesia, NM 88210

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

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

MAY 2 0 1992

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000 Rio Brazos Rd., Aztec, NM 87410	REQUE	ST FOR	ALLOWABI	LE AND A	UTHORIZ	ATIONS	na year	•		
•	1	O THANS	POHT OIL	AND NA	O IAL GA	Wal A	PI No.			
Operator Compone	stion /						30-015-	25371		
Rainbow Energy Corpora	ACTON .									
	dland, T	exas '	79705							
Reason(s) for Filing (Check proper box)				Othe	a (Please expla	un)				
New Well	•	Change in Tra							1	
Recompletion	Oil		y Gas 📙						1	
Change in Operator	Casinghead	Gas Co	ndensate							
and address of previous operator			Operating	Compan	1y, 415 W	. Wall,	Suite l	000, Mi	<u>dland, TX</u> 79701	
U. DESCRIPTION OF WELL	DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation						Lease	L	ane No.	
Lease Name	-		rtesia-Que		Field		Federal or Fee	F	E-8180	
Thomas State		2 1	rtesta qu	Jen Gon						
Location Unit LetterA	_ :330) Fe	et From The	orth Lo	e and330). Fe	et From The _	East	Line	
0	in 18S	Rı	inge 28E	. , N	MPM,	Eddy			County	
- Contract of the Contract of	·Y			DAI GAS						
III. DESIGNATION OF TRAI		or Condensate	VIIN IIVIO	Address (Gi	ve address to w	hich approved	copy of this fo	rm is to be se	nt)	
Name of Authorized Transporter of Oil Navajo Refining Com	nany			501 E.	Main, P	.o. DWR.	159, Ar	tesia, l	MM 88210	
		X or	Dry Gas	Address (Gin	ve address to w	hich approved	copy of this fo	rm is to be se	ent)	
Name of Authorized Transporter of Casiaghead Gas			430 HS&S Bldg Bartlesville OK 74004							
If well produces oil or liquids,	Unit	Sec. T	vp. Rge.	ls gas actual	ly connected?	When	7			
give location of tanks.	A 1	9	18S 28E	Ye						
If this production is commingled with the	t from any oth	er lease or poo	l, give commingl	ing order num	nber:					
IV. COMPLETION DATA						-1- <u>-</u>	Dr. Darek	Same Res'v	Diff Res'v	
	. ~~	Oil Well	Gas Well	New Well	Workover	Deepen	l Mag Brez	Same Kea v	I Res	
Designate Type of Completion		<u> </u>	<u> </u>	Total Depth	<u> </u>		P.B.T.D.	l		
Date Spudded	Date Comp	al. Ready to Pr	rog.	1000 000						
Elevations (DF, RKB, RT, GR, etc.)	Name of P	roducing Form	nation	Top Oil/Gas	Pay		Tubing Dep	th		
				<u> </u>			Depth Cast	a Chae		
Perforations							Deput Casp	ig Since		
					TIO PEGO!	20	<u> </u>			
			ASING AND	CEMENT	ING RECOR	<u> </u>	1	SACKS CEN	ENT	
HOLE SIZE	CA	CASING & TUBING SIZE		DEPTH SET			P	Pa + T1 - 3		
							1 3	- 17-9	3	
				ļ				40 0	7_	
The state of the s	CCC FOR	LLOWAL	ni F	J						
V. TEST DATA AND REQUI	SI FUR A	ALLIC TT PA	lock oil and mus	i be equal to o	or exceed top al	llowable for th	is depth or be	for full 24 ho	ws.)	
OIL WELL (Test must be after Date First New Oil Run To Tank	Date of Te			Producing N	viethod (Flow,)	pump, gas lift.	esc.)			
Pare Lies Les Ou Vos 10 1 aux	Date of 16	-								
Length of Test	Tubing Pr	et Stille		Casing Pres	sne		Choke Size			
							Gas- MCF			
Actual Prod. During Test	Oil - Bbls.			Water - Bbi	le.		O.S. M.C.			
				1						
GAS WELL Actual Prod. Test - MCF/D	Length of	Test		Bbis. Cond	ensate/MMCF		Gravity of	Condensate		
Actual Prod. 1est - MCF/D	LEUGIN CA	100								
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size			
			*							
VI. OPERATOR CERTIF	CATE O	F COMPI	LIANCE		OIL CO	NSER\	ATION	DIVISI	ON	
I hamby certify that the rules and re-	gulations of the	e Oil Conserva	stion .	11	J.L J J					
Division have been compiled with a is true and complete to the best of n	nd that the info ny knowledoe :	ormauon giver and belief.	abuve	n=	te Approv	od	SEP -	S 1993		
	/	1		ll na	re wbblon	an	. 	~ (\\\		
Tusa A	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	In all	L	_						
	· //L	To the second		By	By ORIGINAL SIGNED BY					
Signature Teresa K. Wright Agent				MIKE WILLIAMS Title SUPERVISOR, DISTRICT II						
Printed Name			Title	Titl	esu	PERVISOR	I, DISTHI	1111		
May 13, 1993			85-3328 hone No.	11						
Date		ı eleb	West 140	H						

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.

600 M/S