mut 5 Copies propriate District Office STRICT 1		New Mexico mural Resources De menu	Form C+104 Revised 1-1-89 See Instructions
). Box 1980, Hobbs, NM - 88240 <u>STRICT II</u>). Drawer DD, Artesia, NM - 88210	P.O. I	ATION DIVISION Box 2088 Mexico 87504-2088	JAN 1 2 1994
<u>STRICT III</u> 00 Rio Brazos Rd., Aztec, NM 87410	REQUEST FOR ALLOWA		
perator			Well API No.
Southwest Royalti	es, Inc.		30-015-04623
c/o Box 953, Mid	land, TX 79702		
Bason(s) for Filing (Check proper box)	Change in Transporter of:	Other (Please esplain)	
ew Well	Oil Dry Gas		
hange is Operator	Casinghead Gas Condensate	Effective Date 1	12-1-93
change of operator give name d address of previous operator	<u></u>	······································	
DESCRIPTION OF WELL			Kind of Leave Lease No.
ease Name orth Hackberry Yates	Weil No. Pool Name, Inclu Unit 114 North Ha	ackberry Yates	State, Federal or Fee NM 06766
		LAVELLY INLES	
Unit LonerM	:990Feet From The _	south Line and 330	Feet From The West Line
Section 24 Towns	hip 195 Range 30E	NMPM, Eda	ty County
1. DESIGNATION OF TRA lams of Authorized Transporter of Oil	NSPORTER OF OIL AND NAT		approved copy of this form is to be seni)
Navajo Refining Com			Artesia, NM 88210
lame of Authorized Transporter of Cas	inghead Gas 🔲 or Dry Gas 🥅	Address (Give address to which	approved copy of thus form is to be sent)
f well produces oil or liquids,	Unit Sec. Twp. R	a. Is gas actually connected?	Whea ?
ve location of tanks.	K 24 195 30E		1
' this production is commingled with th V. COMPLETION DATA	at from any other lease or pool, give commi	agling order number:	······································
V. COMPLETION DATA	Oil Well Ges Well	New Well Workover	Deepen Plug Back Same Res'v Diff Res'v
			Deepen Plug Back Same Res'v Diff Res'v
Designate Type of Completic			
	n - (X) j j Dele Compl. Ready to Prod.	Total Depth	P.B.T D.
Date Spudded			
Date Spudded Elevauoas (DF, RKB, RT, GR, etc.)	Dels Compi. Ready to Piud.	Total Depth	P.B.T D.
Dale Spudded Elevauoas (DF, RKB, RT, GR, elc.) Perforations	Date Compl. Ready to Prod. Name of Producing Formation TUBING, CASING AN	Total Depth Top Oil/Gas Pay	P.B.T D. Tubing Depth Depth Casing Shoe
Date Spudded Elevauoas (DF, RKB, RT, GR, etc.)	Date Compl. Ready to Prod. Name of Producing Formation	Total Depth Top Oil/Gas Pay	P.B.T D. Tubing Depth Depth Caung Shoe SACKS CEMENT
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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.