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				New Mexico				-	~
Appropriate District Office DISTRICT I	En	ergy, Mi	nerals and N	atural Resour	rces Departi	nent	• • • •	Revis	C-104 ed 1-1-89
P.O. Box 1980, Hobbs, NM 88240	0					4U	3 199	2 See Ir at Bo	nstructions ttom of Page
D <u>STRICT II</u> P.O. Drawer DD, Antesia, NM 88210	0	ur Cť	PO	ATION 3 Box 2088	DIVISI	JN	D. C. D.		
		Sant		Mexico 875	04-2088		Shi neer	F.	
1000 Rio Brazos Rd., Aztec, NM 87410	BEOUE	ST FO		BLE AND					
[T	D TRAN	ISPORT O	IL AND NA	TURAL G	IZA HUN IAS			
Operator Texaco Exploration ar						Well	API No.		
		lon In	ic. /		<u>_</u>		80-015-2	5154	······
P.O. Box 730 Hobbs,	New Mexic	0 8824	+O						
Reason(s) for Filing (Check proper box) New Well				Oth	er (Please exp	lain)		<u> </u>	·····
Recompletion	Cil	- -	ansporter of: ry Gas	E4	fective	0 1 02			
Change in Operator	Casinghead (1.1	TECTIVE	9-1-92			
f change of operator give name nd address of previous operator									
I. DESCRIPTION OF WELL	ANDIEAS								
Lease Name			ol Name, Inclu	ding Formation		Kind	of Lease		Lease No.
DD 24 Federal				aw Upper	Penn, No	orth State	ederal or Fe		-56220
Location I	1945			South		60			······
Unit Letter		Fe	et From The		e and6	<u> </u>	eet From The	East	Line
Section 24 Townsh	nip 19-S	Ra	24-1	2, NI	MPM,			Eddy	County
II. DESIGNATION OF TRAI	NSPADTED	00 01	A NID NA TH					<u> </u>	
Name of Authorized Transporter of Oil	<u>10</u>	Condensate		Address (Give	e address to wi	hich approve	copy of this f	orm is to be a	ent)
Amoco Pipeline Compa	ny		J	P.O. Bo	x 702068	3 Tulsa,	Oklahon	na 74170)-2068
Name of Authorized Transporter of Casin GPM Gas Corporation	nghead Gas [X] or	Dry Gas	Address (Give	e address to wi	hich approved	copy of this f	orm is to be s	ent)
well produces oil or liquids.	Unit Se		vp. Rge.	4044 Pe	nbrook A	venue C		exas 79	9762
ve location of tanks.		24 19	9S 24Ē	Ye	S	i		9-20-89	
this production is commingled with that V. COMPLETION DATA	from any other lo	ease or pool	l, give comming	ling order numb	er: <u>C</u>	TB-326	······		······
	0	il Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Per'u	Diff Res'v
Designate Type of Completion	· ·		İ	i i		Dupi	TING DACK	Same Kes V	
late Spudded	Date Compl. R	eady to Pro	xd.	Total Depth			P.B.T.D.		
-				1			ſ		
levations (DF, RKB, RT, GR, etc.)	Name of Produ	cing Forma	tion	Top Oil/Gas P	ay		Tubing Dept		
		cing Forma	tion	Top Oil/Gas P	ay		Tubing Dept	h	
levations (DF, RKB, RT, GR, etc.) erforations		cing Forma	tion	Top Oil/Gas P	ау		Tubing Dept Depth Casing		
	Name of Produ				·	D			
	Name of Produ		SING AND	CEMENTIN	·	D	Depth Casing		ENT
erforations	Name of Produ	ING, CA	SING AND	CEMENTIN	IG RECOR	D	Depth Casing	g Shoe	ENT
erforations	Name of Produ	ING, CA	SING AND	CEMENTIN	IG RECOR	D	Depth Casing	g Shoe	ENT
HOLE SIZE	Name of Produ TUB CASING	BING, CA 3 & TUBIN	ASING AND IG SIZE	CEMENTIN	IG RECOR	D	Depth Casing	g Shoe	ENT
HOLE SIZE	Name of Produ TUB CASING	BING, CA 3 & TUBIN OWABI	ASING AND IG SIZE		IG RECORI		Depth Casing	g Shoe ACKS CEMI	
HOLE SIZE	Name of Produ TUB CASING	BING, CA 3 & TUBIN OWABI	ASING AND IG SIZE		IG RECOR DEPTH SET	wable for this	Depth Casing	g Shoe ACKS CEMI	
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HOLE SIZE HOLE SIZE TEST DATA AND REQUES IL WELL (Test must be after r	Name of Produ TUB CASING ST FOR ALL ecovery of total w	BING, CA 3 & TUBIN OWABI	ASING AND IG SIZE	CEMENTIN	IG RECORI DEPTH SET	wable for this	Depth Casing	g Shoe ACKS CEMI	
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HOLE SIZE TEST DATA AND REQUES IL WELL (Test must be after r ate First New Oil Run To Tank angth of Test stual Prod. During Test	Name of Produ TUB CASING ST FOR ALL ecovery of total w Date of Test Tubing Pressure	BING, CA 3 & TUBIN OWABI	ASING AND IG SIZE	CEMENTIN be equal to or e Producing Met	IG RECORI DEPTH SET	wable for this	Depth Casing S depth or be fo c.) Choke Size	g Shoe ACKS CEMI	
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1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

All sections of this form must be filled out for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
Separate Form C-104 must be filed for each pool in multiply completed wells.