Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources D treent

RIVED

Form C-104 /157

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

OIL CONSERVATION DIVISION P.O. Box 2088

. 4'30

Santa Fe, New Mexico 87504-2088

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

TOTRANSPORT OIL AND NATURAL GAS Subject to the producting Company Subject to the producting Company Subject to the producting Company Subject to the production of Ring Subject proper and control for Ring Company and Control for Ring Subject Production Step Sub	DISTRICT III 1000 R.o Brazos Rd., Aztec, NM 87410			BLE AND AUTHORIZAT	ION J	C. D. N. OFFICE		
Name of Authorized Transpriet of California (Pages Poll And NATURAL GAS Marked Transported of California (Pages Poll And NATURAL GAS Marked Transported of California (Pages Poll And NATURAL GAS Marked Transported of California (Pages Poll And NATURAL GAS Marked Transported of California (Pages Poll And NATURAL GAS Marked Transported of California (Pages Poll And NATURAL GAS Marked Transported of California (Pages Poll And NATURAL GAS Marked Transported of California (Pages Poll And NATURAL GAS Marked Transported of California (Pages Poll And NATURAL GAS Marked Transported of California (Pages Poll And NATURAL GAS Marked Transported of California (Pages Poll And NATURAL GAS Marked Transported of California (Pages Poll And NATURAL GAS Marked Transported of California (Pages Poll And NATURAL GAS Marked Transported of California (Pages Poll And NATURAL GAS Marked Transported of California (Pages Poll And NATURAL GAS Marked California (Pages Poll And Natural (Pages Poll An		AND NATURAL GAS	NATURAL GAS Well API No.					
P. O. Box 823085, Dallas, Texas 75382-3085 Ranacici for Flag (Chuic proper loc) New Will Charge in Transporter of Charge in Operator Onl Dyn Gas Charge in Operator Charge in Transporter of Charge in Operator Onl Dyn Gas Charge in Operator Charge in Operator Charge in Operator Charge in Operator Onl Dyn Gas Charge in Operator Charge in Operator In Description of Proton Operator Use later Description of Proton The Bagger Draw, NUpper Pennsylvanian Dasger Draw 31 Federal Lease No. Dagger Draw 31 Federal Lossion Lossion Lossion In Description of Proton The Bagger Draw, NUpper Pennsylvanian Description of Authority of Onl Opporator In Description of Operator In Description o	Nearburg Producing Co							
Rease(1) for Filing (Cheez proper box) Recompletion Oni Dry Gas	Address	llas Texas 7	75382-3085					
Change of Departer Change of Prespected State Condensate Change of Species give name and address of previous operators		itus, texus i		Other (Please explain)				
Recomption Oil Op Cas Canisphead Gas Condensate	,	Change in	Transporter of:					
Causgined Gise Causgined Gise Cendensias								
Lazar No. Preservoir operator Lazar No. Description of well-and Leave No. Dargeer Draw, NUppper Pennsylvanian State, Federal or Fee NNNN84701 Location Location Location Location 100 100 100 100 100 100 100 1		Casinghead Gas	Condensate					
Lease Name Darger Draw 31 Federal Telephone Darger Draw New Ne	If change of operator give name and address of previous operator					· · · · · ·		
Data Specific Draw 31 Federal Dagger Praw, IILipper Pennsylvanian State, Federal or Fee NMNM84701	II. DESCRIPTION OF WELL.	AND LEASE			ų			
Unit Letter D 660 Feet From The north Line and 660 Feet From The WeSt Line Section 31 Township 19S Range 25E NMPM Eddy Country	Lease Name Well No. Pool Name, Including				NAME AND ASSESSED ASSESSEDA			
Unit Letter U 0 000 Feet From The Cline Section 31 Township 19S Range 25E NMPM, Eddy County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authority Transporter of OR 27 or Condensuse Active of Authority Transporter of OR 27 or Condensuse Active of Authority Transporter of OR 27 or Condensuse Active of Authority Transporter of OR 27 or Condensuse Active of Authority Transporter of Canaphead Gas Active (Give actives to which approved copy of this form as to be seril) Name of Authority Transporter of Canaphead Gas Active (Give actives to which approved copy of this form as to be seril) Name of Authority Transporter of Canaphead Gas Active (Give actives to which approved copy of this form as to be seril) Name of Authority Transporter of Canaphead Gas Active (Give actives to provide approved copy of this form as to be seril) Active (Give actives to provide approved copy of this form as to be seril) If well produces oil or liquids, Unit Sec. Twp Reg. 125E No. 1 195 per section of tensor provided and to committed with that from any other lease or pool, give commingling order number. IV. COMPLETION DATA Designate Type of Completion - (X) No. 1 195 per Sec. 1 195 per New Well Workover Deseptin Plug Back Same Resv Diff Resv Plansport (PR.R.R. Rf. GR. stc.) Date Spadded Date Completion for the New York New York (PR.R. Rf. GR. stc.) Date Spadded Date Completion for the New York (PR.R. Rf. GR. stc.) Date Spadded Date Completion for the New York (PR.R. Rf. GR. stc.) Date Spadded Date Completion for the New York (PR.R. Rf. GR. stc.) Date Spadded Date Completion for the New York (PR.R. Rf. GR. stc.) Date Spadded Date Completion for the New York (PR.R. Rf. GR. stc.) Date Type Of Completion for the New York (PR.R. Rf. GR. stc.) Date Spadded Date Completion for the New York (PR.R. Rf. GR. stc.) Type Of Completion for the New York (PR.R. Rf. GR. stc.) Date Type Of Completion for the New York (PR.R. Rf. GR. stc.) Date Type Of Completion for the New York (PR.R. Rf. GR. stc.) Type Of Complet		6.60		anth 660			west.	
Section St Township 1-35 Sange 1-35 Sange 1-35 Sange 1-35 Sange	Unit LetterD	: 660	Feet From The	Line and OOO	irth Line and 600 Feet From The West Line			
Name of Authorized Transporter of Oil	Section 31 Township	, 198	Range 25E	, NMPM,	Edd	У	County	
Name of Authorized Transporter of Casinghead Gas X				RAL GAS	nnroyed	conv of this form	is to he sent)	
Name of Authorized Transporter of Casinghead Gas Feagar (Catherling Corpany) If well produces oil of liquids, give location is commingled with that from any other lesse or pool, give commingling order number: If well produces oil of liquids, give location is commingled with that from any other lesse or pool, give commingling order number: If this production is commingled with that from any other lesse or pool, give commingling order number: If this production is commingled with that from any other lesse or pool, give commingling order number: IV. CONIPLETION DATA Designate Type of Completion - (X) Dask Spatisted Dask Compl. Red.) Dask Completion (X) X X X X X X X X X		I A I	3 1	P. O. Box 1558. Brecke	enridge	e, Texas 760	024	
Feedgan Gathering Corpany Unit Sec. Twp. Rgs Is pas actually connected? When? When? If well production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA				Address (Give address to which a	pproved	copy of this form	is to be sent)	
If this production is communiqued with that from any other lease or pool, give commingling order number: If this production is communiqued with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA Designate Type of Completion - (X) Date Spudded Date Compl. Ready to Prod. Bost Spudded 7/24/90 PB.T.D. 7956 ' Tubing Depth 7/493 ' Depth Casing Shoe Perforations 7/04'-05', 76/8'-83' (1/8 holies, 2 SPF) Perforations 7/04'-05', 76/8'-83' (1/8 holies, 2 SPF) Perforations 7/04'-05', 76/8'-83' (1/8 holies, 2 SPF) TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING AND CEMENTING RECORD HOLE SIZE CASING AND CEMENTING RECORD HOLE SIZE CASING AND CEMENTING RECORD Bost Spudded 7/24/90 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 exceted top allowable for this depth or be for full 24 hours) Producing Method (Flow, pump, gast life, etc.) Producing Method (Flow, pump, gast life, etc.) Producing Method (Flow, pump, gast life, etc.) Flowing Casing Pressure 24 hour's 360f Actual Prod. During Test Oil - Bbis. 68.0 Casing Pressure (Shut-in) Choke Size OIL CONSERVATION DIVISION Date Offers JAN 2 8 1991 Date Offers JAN 2 8 1991 Date Offers Sprantare Nachelle Byrum Production Secretary MEE Bost Same Reav V Diff Res Port Condensate Nachelle Different Same Reavy Different Same Reave PB.T.D. Top Oil Case Pay Tubing Pressure Sprantare Sprantare Sprantare Date Offers Date Offe	Feagan Gathering Company	gan Gathering Company 440			400 North Big Springs, Suite 305, Midland, Texas 79705			
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) X X X X X X X X X				1 -		·		
Designate Type of Completion - (X)				ling order number:				
Date Spudded A Date Compil Ready to Prod. 8 28 9 P.B.T. D. 7956			I Gas Weil	New Well Workover D	eepen	Plug Back Sa	me Res'v Diff Res'v	
Road	Designate Type of Completion	1 "						
Upper Pennsylvanian 7678' 7493' Perforations 7704'-09', 7678'-83' (178 holes, 2 SPT) 7840'-58', 7830'-34', 7823'-25', 7810'-20', 7785'-7804', 7754'-60', 7722'-42', TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING A TUBING SIZE DEPTH SET SACKS CEMENT 12-1/4" 9-5/8" 1,309' 1400 SX for TD- 8-3/4" 7" 8,029' 1950 SX 2-1-2. 2-7/8" 7,493' 2-1-9. 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 8/26/90 9/5/90 Producting Method (Flow, pump, gast lift, etc.) 12-1/4" 9-5/8" 7,493' Army 4 B 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 8/26/90 9/5/90 Flowing 8/26/90 9/5/90 Flowing Choke Size 1 Hours 360# N/A 15/64" Actual Prod. During Test Oil - Bbit. Gas- MCF 147 199 GAS WELL Actual Prod. Test - MCF/D Length of Test Bbit. Condensate/MMCF Gravity of Condensate 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. 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. Biblic. Condensate/MMCF OIL CONSERVATION DIVISION Date Approved By MIKE W. S. S. 1991				8029 '	9'		P.B.T.D. 7956'	
Perforations 7704'-09', 7678'-83' (178 holes, 2 SPT) 7840'-58', 7830'-34', 7823'-25', 7810'-20', 7785'-7804', 7754'-60', 7722'-42', TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 12-1/4" 9-5/8" 1,309' 1400 sx 120-120-120 sx 2-7-2/8" 1,309' 1950 sx 2-7-2/8" V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Crest 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.) 8/26/90 P/5/90 Flowing Length of Test Sold Water - Bbls. Casing Pressure Casing Pressure 24 hours 360# N/A 15/64" Actual Prod. During Test Oil - Bbls. Water - Bbls. Gas-MCF GAS WELL GAS WELL Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate VI. OPERATOR CERTIFICATE OF COMPLIANCE Increby 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. Date Approved By ORIGINAL SIGNED BY MIKE WALL S		evations (DF, RKB, RT, GR, etc.) Name of Producing Formation			-			
TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 12-1/4" 9-5/8" 1,309' 1400 sx / 10-12-140' 8-3/4" 7" 8,029' 1950 sx 2-1-9. **TUBING CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT 12-1/4" 9-5/8" 1,309' 1400 sx / 10-12-140' 1950 sx 2-1-9. **TUBING CASING AND CEMENTING RECORD **TUBING CASING AND CEMENTING RECORD 1,309' 1400 sx / 10-12-140' 1950 sx 2-1-9. **TUBING CASING AND CEMENTING RECORD **TUBING SIZE SACKS CEMENT 1,309' 1400 sx / 10-12-140' 1950 sx 2-1-9. **TUBING SIZE 1,309' 1400 sx / 10-12-140' 1950 sx 2-1-9. **TUBING CASING AND CEMENTING RECORD **TUBING SIZE 1,400 sx / 10-12-140' 1950 sx 2-1-9. **TUBING CASING AND CEMENTING RECORD **TUBING SIZE 1,400 sx / 10-12-140' 1950 sx 2-1-9. **TUBING CASING AND CEMENTING RECORD **TUBING SIZE 1,400 sx / 10-12-140' 1950 sx 2-1-9. **TUBING CASING AND CEMENTING RECORD **TUBING SIZE 1,400 sx / 10-12-140' 1950 sx 2-1-9. **TUBING CASING AND CEMENTING RECORD **TUBING CASING AND CEMENT AND	3557.4 GR			7678				
HOLE SIZE 12-1/4" 9-5/8" 1,309' 1400 SX	7840'-58', 7830'-34', 7823'-	-25', 7810'-20'	, 7785'-7804',			Lepth Casing S	, , , , , , , , , , , , , , , , , , ,	
12-1/4" 9-5/8" 1,309' 1400 SX 15-17- 8-3/4" 7" 8,029' 1950 SX 2-1-7. 2-7/8" 7,493' 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.) Dute First New Oil Run To Tank 8/26/90 9/5/90 Producing Method (Flow, pump, gas lift, etc.) Flowing Length of Test 24 hours 360# Actual Prod. During Test Oil - Bbis. 68.0 Casing Pressure N/A 15/64" Water - Bbis. Gas- MCF 199 GAS WELL Actual Prod. Test - MCF/D Length of Test 199 GAS WELL 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 completed with and that the information given above is true and complete to the best of my knowledge and belief. WILL OPERATOR SERVATION DIVISION Date Approved By ORIGINAL SIGNED BY MIKE WALL SAMED MIKE WAL						SACKS CENTRIT		
12-174 3-3/4" 7" 8,029" 1950 sx 2-1-9			UBING SIZE					
V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL OIL WELL Other First New Oil Run To Tank 8/26/90 Length of Test 24 hours Oil - Bbls. Oil - Bbl								
V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Due First New Oil Run To Tank 8/26/90 Length of Test 24 hours Casing Pressure 24 hours Casing Pressure 360# Actual Prod. During Test Oil - Bbis. GAS WELL Actual Prod. Test - MCF/D Length of Test Length of Test 68.0 Casing Pressure 147 Length of Test 199 CASINAL SIGNED BY 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. Date Approved By Original Signet Description Original Production Secretary OIL ORIGINAL SIGNED BY MICE WALL OIL ORIGINAL SIGNED BY MICE WALL OIL ORIGINAL SIGNED BY	8-3/4"	/						
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 8/26/90 Length of Test 24 hours Tubing Pressure 24 hours Oil - Bbls. Oil - Bbls. Forducing Method (Flow, pump, gas lift, etc.) Flowing Choke Size N/A 15/64" Water - Bbls. Gas- MCF 147 199 GAS WELL Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate 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. Wignature Signature Production Secretary Production Secretary Producing Method (Flow, pump, gas lift, etc.) Flowing Choke Size Choke Size Choke Size Choke Size OIL CONSERVATION DIVISION Date Approved JAN 2 8 1991 By ORIGINAL SIGNED BY MKE Water - Bbls. ORIGINAL SIGNED BY		2-1/6		7,130				
Date First New Oil Run To Tank 8/26/90 Length of Test 24 hours Casing Pressure 360# Actual Prod. During Test Oil - Bbis. 68.0 Casing Pressure N/A 15/64" Mater - Bbis. Gas-MCF 199 GAS WELL Actual Prod. Test - MCF/D Length of Test Tubing Pressure 360# N/A 15/64" Mater - Bbis. Gas-MCF 199 GAS WELL Actual Prod. Test - MCF/D Length of Test Bbis. Condensate/MMCF Gravity of Condensate 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. Production Secretary	V. TEST DATA AND REQUE	ST FOR ALLOW	ABLE		, a.a.		E.J. 24 hours	
8/26/90 By 5/90 Solution of Test Length of Test 24 hours Actual Prod. During Test Oil - Bbls. 68.0 Casing Pressure N/A 15/64" Matter - Bbls. 147 Signature Oil - Bols. Tubing Pressure 360# N/A 15/64" Signature N/A 15/64" Signature Choke Size Choke Size N/A 15/64" Signature N/A 15/64" Signature Oil - Bbls. Casing Pressure Choke Size Choke Size Choke Size Choke Size Choke Size Oil - Bbls. Condensate/MMCF Gravity of Condensate Choke Size Casing Pressure (Shut-in) Choke Size OIL CONSERVATION DIVISION Date Approved JAN 2 8 1991 By Original Signed By MIKE WALL MIKE WA			e of load oil and musi	Description Method (Flow number	eas lift a	s depin or be for	juii 24 nours.)	
24 hours 360# N/A 15/64" Actual Prod. During Test Oil - Bbls. 68.0 GAS WELL Actual Prod. Test - MCF/D Length of Test Actual Prod. Test - MCF/D Length of Test Testing Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Casing Pressure (Shut-in) 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. Bbls. Condensate/MMCF Gravity of Condensate Casing Pressure (Shut-in) Oil CONSERVATION DIVISION Date Approved JAN 2 8 1991 By ORIGINAL SIGNED BY MIKE WALL SIGNED BY MIKE WALL SIGNED BY	8/26/90	9/5/9	0	Flowing				
Actual Prod. During Test Oil - Bbis. 68.0 GAS WELL Actual Prod. Test - MCF/D Length of Test Diling Pressure (Shut-in) Tubing Pressure (Shut-in) Casing 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. Date Approved By ORIGINAL SIGNED BY MIKE WALL MIKE WALL MIKE WALL Signature Machelle Byrum Production Secretary	5							
GAS WELL Actual Prod. Test - MCF/D Length of Test Bibls. Condensate/MMCF Gravity of Condensate Testing Method (pitot, 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. Date Approved By ORIGINAL SIGNED BY MIKE WALL Signature MIKE WALL SIGNED BY				1				
Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate 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. Date Approved Bbls. Condensate/MMCF Casing Pressure (Shut-in) OIL CONSERVATION DIVISION Date Approved Date Approved By ORIGINAL SIGNED BY MAKE WALLER MAKE WALLER ORIGINAL SIGNED BY	Actual Front During Test			I control of the cont		1		
Testing Method (pitot, 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. Date Approved Date Approved By ORIGINAL SIGNED BY Nachelle Byrum Production Secretary						TA		
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. Date Approved By ORIGINAL SIGNED BY Wachelle Byrum Production Secretary WIKE WALL STATEMENT OF COMPLIANCE OIL CONSERVATION DIVISION Date Approved By ORIGINAL SIGNED BY	Actual Prod. Test - MCF/D	Length of Test		Bbis. Condensate/MMCF		Gravity of Condensate		
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. Date Approved By ORIGINAL SIGNED BY Wachelle Byrum Production Secretary MKE WALL STATES MIKE	Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)		Choke Size		
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. Date Approved By ORIGINAL SIGNED BY Nachelle Byrum Production Secretary MKE WALL STATES OF THE PRODUCTION OF TH	VI. OPERATOR CERTIFIC	CATE OF COM	PLIANCE	011 00110		ATION	MUSION	
Date Approved	I hereby certify that the rules and regu	OIL CONSERVATION DIVISION						
Machell Byrum Production Secretary By ORIGINAL SIGNED BY	Division have been complied with and is true and complete to the best of my	Date ApprovedJAN 2 8 1991						
Nachelle Byrum Production Secretary MKE WALL S	Marke Ole Bu	Un				יסאורה הע		
Printed Name Title II TITLE CLIDEDVISOR DISTRICT II	Signature Machelle Byrum	MIKE WILL 13						
Printed Name 9/11/90 214/739–1778 Title SUPERVISOR, DISTRICT II	Printed Name 9/11/90	Tille 3-1778	Title SUPER	RVISO f	R, DISTRIC	<u> </u>		
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 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.