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

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

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

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

IL DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease No.	I.	HEC		OR ALLOW				1			
Address Control Column C	Operator	·	10 16	ANSPURI	JIL AND N	IA I UHAL (I API No			
ABSORDED TO FINE (CAMES POPE FOR THE STATE OF THE STATE O	L Ambeo Inc.								07087		
Content Files (Check proper box Change in Transporter of Change in Open Change in Transporter of Change in Open	Address							**************************************			
New Well			W. Mid	Hand. TX	79705						
Recognition		ι)			ŢŅ (Ther (Piease ex	plain)				
Catagonal Gas Condemnate Catagonal Gas Catagonal Gas			Change i	7	٦	O CHANGE	NAME E	TITE MOS	# MOD 37	r, roc	
Consequence give nature of control of the control	=		<u>_</u>	- · -		VLIE #2.	THIS W	ELT IS 1	tor A co		
Less Name DESCRIPTION OF WELL AND LEASE		Caninghe	ead Gas	Condensate	<u> </u>						
Lease Name Well No. Pool Name, Inchaling Formation State of Lase Lease No	and address of previous operator										
Lease Name Well No. Pool Name, Inchaling Formation State of Lase Lease No	II DESCRIPTION OF WEI	IANDIE	PACE					· · · · · · · · · · · · · · · · · · ·			
LOCATION Unit Letter Prom The NOTE Line and 1980 Feet From The SAC Line Section Township 19 S Range S F NOTEM EDTY COUNTY Line and 1980 Feet From The SAC Line Section Township 19 S Range S F NOTEM EDTY COUNTY Line and 1980 Feet From The SAC Line Section Township 19 S Range S F NOTEM EDTY COUNTY Line and 1980 Feet From The SAC Line Section Township 19 S Range S F NOTEM EDTY COUNTY Line and 1980 Feet From The SAC Line Section Township 19 S Range S F NOTEM EDTY COUNTY Line and 1980 Feet From The SAC Line Line and 1980 Feet From The SAC Line Additional Transport of Oil 1980 Feet From The SAC Line Additional Transport of Catalyshed Gas Additional Transport of Catalyshed Gas Additional County of this form as to be sent) Additional County of this form as to		L AND LE		Pool Name Inci	uding Formatio		i V:-	4 -61			
Lossion Loss	-HE 77			1	_					Lease No.	
Section Township 19 C Range OF F NNPA EDIT County II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil	Location			1 N.J - 1/4 - 5-35	A HERMI	FERR FRR	<u>.</u>		<u> </u>		
Section 7 Township 12 S Range 25 F NNPM EDTY COMMY III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorised Transporter of Call And Carlon of Canadanase Authorised Transporter of Call Authorised Transporter	Unit Letter	: F	860	Feet From The	NORTH .	ine and	+00: 1		P 6 (37)		
IL DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Automated Transporter of OIL AND NATURAL GAS Name of Automated Transporter of OIL AND NATURAL GAS Name of Automated Transporter of OIL AND NATURAL GAS Name of Automated Transporter of OIL AND NATURAL GAS Name of Automated Transporter of OIL AND NATURAL GAS Name of Automated Transporter of OIL AND NATURAL GAS Name of Automated Transporter of OIL AND NATURAL GAS Name of Automated Transporter of OIL AND NATURAL GAS Name of Automated Transporter of OIL AND NATURAL GAS Name of Automated Copy of the form us to be seen) Addition of Confederate Oil Copy of the form us to be seen) Addition of Name of Oil Copy of Oil Co	• 5						1960 - 1	rect From 1 he	<u> </u>	Line	
Address (Cive address to which approach copy of this form as to to sens) Address (Cive address to which approach copy of this form as to to sens) Address (Cive address to which approach copy of this form as to to sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of	Section Towns	hip 1	9.5	Range	25 F ,	NMPM,	EDDY			County	
Address (Cive address to which approach copy of this form as to to sens) Address (Cive address to which approach copy of this form as to to sens) Address (Cive address to which approach copy of this form as to to sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of this form as to be sens) Address (Cive address to which approach copy of	III DESIGNATION OF TRA	NCDODO	7D OF 6								
Street of Authorized Transporter of Caninghead Gas	Name of Authorized Transporter of Oil	NSPORTE									
Address (Times of Consequence of C	•	L yl x	OI COROR							ent)	
Vest production of leads. Unit Sec. Twp. Reg. It gas extually connected? Where ? 12-20-95. This production is commissigated with that from any other lease or pool, give commissing order number: Vest 12-20-95. Vest 12-20-95. Vest Ve		nghead Gas	shead Gas Or Dry Gas			PO BOX 702068 TULSA					
year produces of or legads. Date Sec. Twp. Reg. In gas actually connected? Where ? 12-00-90			- X X	u Diy G25						eni)	
TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE TEST DATA AND REQUEST FOR ALLOWABLE (L WELL. (Test mant be after recovery of steal waters of food oil and must be equal to or exceed top allowable for this depth or be for full 24 hours;) The First New Oil Run To Tank Tubing Pressure Casing Pressure Casin	if well produces oil or liquids,	Unit	Sec.	Twp. Re					: 2 (1)-1		
Designate Type of Completion - (X) Oil Well Gas Well New Well Workover Deepen Plug Back Same Res V Diff Res V Diff Res V Dies Spadded Date Completion - (X) Date Approved	· · · · · · · · · · · · · · · · · · ·			198 25E	y	ES.		-	92		
Designate Type of Completion - (X) Dis Well Date Spudded Date Compt. Ready to Prod. Display Designate Type of Completion - (X) Date Spudded Date Compt. Ready to Prod. Date Date Spudded Date Compt. Ready to Prod. Total Depth P.B.T.D. Tubing Depth Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT Part IP - 3 G - 25 - 33 Long Lucil Spucesta TEST DATA AND REQUEST FOR ALLOWABLE IL WELL (Test ment 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 Rus To Tank Date of Test Date of Test Tubing Pressure Casing Pressure Casing Pressure Choice Size Oil - Bbis. Date Approved Depth Casing Shoe Depth Casing Shoe Depth Casing Shoe Tubing Depth Sacks CEMENT Part IP - 3 G - 25 - 33 Long Lucil Spucesta Large Sput Sput Sput Sput Sput Sput Sput Sput	f this production is commingled with the	t from any oth	ner lease or	pool, give commin	gling order nur	nber:					
Designate Type of Completion - (X) Date Compl. Ready to Prod. Total Depth P.B.T.D. Invarions (DF, RKB, K., GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth Depth Casing Shoce TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT For J D - 3 G - 2 5 - 33 Ling Lucil Signature TEST DATA AND REQUEST FOR ALLOWABLE IL WELL (Test must be after recovery of total volume of load oil and must be aqual to or exceed top allowable for this depth or be for full 24 hours.) INTER New Oil Rus To Tank Date of Test Tubing Pressure Casing Pressure Casing Pressure Cooks Size Tubing Test I Uning Pressure (Shut-in) Langth of Test Ling Method (picor, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Casing Pressure (Shut-in) Casing Pressure (Shut-in) Date Approved By ORIGINAL SIGNED BY MINE WILL AND Supervision, DISTRICT IP Title Title Title	v. COMPLETION DATA										
Date Compl. Ready to Prod. Invations (DF, RKB, KT, GR, etc.) Invations (DF, RKB, KT, GR, etc.) Invations (DF, RKB, KT, GR, etc.) Invation of Producing Formation TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT For JD - 3 G - 2 5 - 23 Chay well processe TEST DATA AND REQUEST FOR ALLOWABLE IL WELL Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for that depth or be for full 24 hours.) In the prod. Test Tubing Pressure Casing Pressure Casing Pressure Cooks Size Chair Prod. During Test Oil - Bibls. Water - Evis. Gravity of Condensate Lock Size OIL CONSERVATION DIVISION Division have been complised with and that the information given above a true and complete to the beat of my knowledge and belief. By ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR. DISTRICT 19 Title Title Title	Designate Type of Completion	1 - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Invasions (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oli/Gas Pay Tubing Depth Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT Part 10-3 G-25-33 chy well recovery Invasions TEST DATA AND REQUEST FOR ALLOWABLE IL 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:) Inter I real New Oil Run To Tank Date of Test Tubing Pressure Casing Pressure Cooke Size Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Cooke Size OIL CONSERVATION DIVISION Division have been completed with and that the information given above as true and complete to the best of my knowledge and belief. Date Approved By ORIGINAL SIGNED BY MIKE WILL TAMES SUPERVISOR, DISTRICT IN Thile Thile Thile Maken Maken Title Thile Thile Thile Title Thile Title Title Title			n Ready to	Pool .	Total Domb	<u> </u>	<u></u>	<u>Ļ</u>	J		
TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT For J J - 3 C-2 5 - 13 Chy well recover TEST DATA AND REQUEST FOR ALLOWABLE IL 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 of Test Date of Test Producing Method (Flow, pump, gas lift, etc.) Tubing Pressure Casing Pressure Casing Pressure Choke Size Tubing Pressure (Shus-in) Casing Pressure (Shus-in) Choke Size OIL CONSERVATION DIVISION Durison have been compiled with and that the information given above as tree and complete to the bear of my knowledge and belief. Date Approved By ORIGINAL SIGNED BY MIKE WILLLAMS SUPERVISOR, DISTRICT IF Title Title Title	•		Date Compi. Ready to Proc.						P.B.T.D.		
TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT Pot JD-3 6-25-33 Long well 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.) TEST DATA AND REQUEST FOR ALLOWABLE IL WELL Test must be ofter 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 FIRS New Oil Run To Tank Date of Test Producing Method (Flow, pump, gas lift, etc.) Tubing Pressure Casing Pressure Choke Size Table Length of Test Dist. Condensate/MMCF Gravity of Condensate Cravity of Condensate Condensate MMCF Description have been compiled with and that the information gives above as true and complete to the beat of my knowledge and belief. Date Approved By ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT IF Title Title Title	Elevations (DF, RKB, RT, GR, etc.)	Name of Pr	roducing Fo	ermation	Top Oil/Gas	Pay		Tubing Do			
TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT For J D - 3 C- 2 5- 13 Color Well Bracense TEST DATA AND REQUEST FOR ALLOWABLE IL 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.) Inter First New Oil Run To Tank Date of Test Tubing Pressure Casing Pressure Choke Size Conjing Pressure (Shut-in) Casing Pressure (Shut-in) Conjing Pressure (Shut-in) Date Approved By ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT 19 Title Title Title Title								rooming toep	ME I		
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT For JJ-3 (6-25-33 Chy well seasons TEST DATA AND REQUEST FOR ALLOWABLE IL WELL (I set 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) must be of Test Date of Test Producing Method (Flow, pump, gas lift, etc.) Casing Pressure Casing Pressure Casing Pressure Cooke Size Choke Size	Performations							Depth Casir	ng Shoe	-	
HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT For JJ-3 (6-25-33 Chy well seasons TEST DATA AND REQUEST FOR ALLOWABLE IL WELL (I set 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) must be of Test Date of Test Producing Method (Flow, pump, gas lift, etc.) Casing Pressure Casing Pressure Casing Pressure Cooke Size Choke Size											
TEST DATA AND REQUEST FOR ALLOWABLE IL 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;) are First New Oil Run To Tank Date of Test Producing Method (Flow, pump, gas lift, etc.) might of Test Tubing Pressure Casing Pressure Choke Size canal Prod. During Test Oil - Bbls. Water - Bbls. Gas-MCF AS WELL Main Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate aliang Method (puot, back pr.) Tubing Pressure (Shis-in) Casing Pressure (Shis-in) Choke Size L. OFERATOR 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 as true and complete to the best of my knowledge and belief. By ORIGINAL SIGNED BY MIKE WILLIAMS Supervisor, District 19 Title Title Title Title Title	1101 = 01=				CEMENT	CEMENTING RECORD					
TEST DATA AND REQUEST FOR ALLOWABLE IL WELL	HOLE SIZE	CAS	CASING & TUBING SIZE			DEPTH SET			SACKS CEM	ENT	
TEST DATA AND REQUEST FOR ALLOWABLE IL 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 of Test Date of Test Producing Method (Flow, pump, gas lift, etc.) Casing Pressure Casing Pressure Cooke Size Choke Siz								<u> Part</u>	<u> 10-3</u>		
TEST DATA AND REQUEST FOR ALLOWABLE IL 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 of Test Date of Test Producing Method (Flow, pump, gas lift, etc.) Casing Pressure Casing Pressure Cooke Size Choke Siz		+						6-	<u> 25-73</u>		
IL 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.) Interest new Oil Run To Tank Date of Test		 						ch	g well a	week.	
Date of Test Date of Test Producing Method (Flow, pump, gas lift, etc.) AS WELL Stand Prod. Test - MCF/D Length of Test Bills. Condensate/MMCF Casing Pressure Casing Pressure Casing Pressure Choke Size Water - Bbls. Gas- MCF AS WELL Stand Prod. Test - MCF/D Length of Test Bills. Condensate/MMCF Casing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size L. 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 as true and complete to the best of my knowledge and belief. Date Approved By ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT IF Title Title Title	. TEST DATA AND REQUE	ST FOR A	LLOWA	BLE	<u> </u>			·	<u> </u>		
Producing Method (Flow, pump, gas lift, eac.) Ingth of Test ITubing Pressure Casing Pressure Casing Pressure Casing Pressure Casing Pressure Casing Pressure Choke Size Water - Bbls. Water - Bbls. Gas- MCF AS WELL Final Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate Casing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size Condensate/MMCF Cravity of Condensate Choke Size Condensate/MMCF Cravity of Condensate Condensate Condensate/MMCF Cravity of Condensate Condensate/MMCF Condensate/MMCF Cravity of Condensate Condensate Condensate/MMCF Condensa	IL WELL (Test must be after	recovery of Lot	tal volume d	of load oil and mus	t be equal to or	exceed top allo	mable for this	depth or be j	for full 24 how	· s .)	
AS WELL Thusi Prod. Test - MCF/D Length of Test Bibls. Condensate/MMCF Gravity of Condensate Signature Control of the best of my knowledge and belief. Bibls. Condensate/MMCF Gravity of Condensate Consignation of the control of the contro	late First New Oil Run To Tank										
AS WELL Thusi Prod. Test - MCF/D Length of Test Bibls. Condensate/MMCF Gravity of Condensate Signature Control of the best of my knowledge and belief. Bibls. Condensate/MMCF Gravity of Condensate Consignation of the control of the contro	earth of Test	!		-,			-	1-			
AS WELL Table Prof. Test - MCF/D Length of Test Bibls. Condensate/MMCF Gravity of Condensate English Method (pilot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size Condensate Condensate Choke Size	ougui ta 10a	Ubing Pres	MILE		Casing Press	TLG		Choke Size			
AS WELL Tutal Prod. Test - MCF/D Length of Test Bibls. Condensate/MMCF Gravity of Condensate Bibls. Condensate/MMCF Gravity of Condensate Casing Pressure (Shut-in) Choke Size Condensate Choke Size Condensate/MMCF Casing Pressure (Shut-in) Choke Size Choke	ctual Prod. During Test	Oil - Rbis	Oil . Phie			Water - Dhie			Gas- MCF		
Loperator Certificate of Test Loperator 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 as true and complete to the best of my knowledge and belief. Loperator Certificate of Compliance I hereby certify that the rules and regulations of the Oil Conservation Division have been complete to the best of my knowledge and belief. Date Approved ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT IN Title Title Title	5 · ·	Oli - Bois.	Oil - 2015.			What bolk					
Loperator Certificate of Test Loperator 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 as true and complete to the best of my knowledge and belief. Loperator Certificate of Compliance I hereby certify that the rules and regulations of the Oil Conservation Division have been complete to the best of my knowledge and belief. Date Approved ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT IN Title Title Title	AS WELL							<u>!</u>			
Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size Coperator 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 as true and complete to the best of my knowledge and belief. Date Approved ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT IF Title Title Title Title	ctual Prod. Test - MCF/D	Length of T	est		IDhia Candan	A0/CE		· · · · · · · · · · · · · · · · · · ·			
L 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 as true and complete to the best of my knowledge and belief. Sugnature ELLI, E. KEATHLY SE. PEGHIATORY SPEC. Prizzed Name Talle 915-656-5424 OIL CONSERVATION DIVISION JUN 1 7 1993 Date Approved ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT IF Title Title	-				BOIL CUBURE	MEMINICI		Gravity of C	ondensate		
L 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 gives above as true and complete to the best of my knowledge and belief. Sugnature ELLI, E. KRATHLY SE. PEGHIATORY SPEC. Prizzed Name Talle 915-656-5424 OIL CONSERVATION DIVISION JUN 1 7 1993 Date Approved ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT IF Title Title	sting Method (pitot, back pr.)	Tubing Pres	aure (Shut-i	n)	Casing Press.	re (Shut-in)		Onoke Size			
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above as true and complete to the best of my knowledge and belief. OIL CONSERVATION DIVISION		i				•					
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above as true and complete to the best of my knowledge and belief. OIL CONSERVATION DIVISION	L OPERATOR CERTIFIC	ATE OF	COMPI	IANCE	1			<u> </u>			
Division have been complied with and that the information given above as true and complete to the best of my knowledge and belief. Date Approved ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT IF Title PLACE Printed Name 915-656-5424 Title Title	I hereby certify that the rules and regula	ations of the C	Dil Conserva	ition		DIL CON	SERVA	TION [DIVISIO	N	
Signature ELLL E. KEATHLY SE. PEGULATORY SPEC. Printed Name #1-14-94 915-656-5424 Date Approved By ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT IF Title Title	Division have been complied with and	that the inform	nation gives	above	ll .lln				1 7 1003		
Segnature ELLL E. KEATHLY SE. PEGULATORY SPEC. Printed Name #14-94 915-686-5424 By ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT IF Title Title	is true also complete to the best of my i	mowledge and	l belief.		Date	Approved	4	JUN	T 1 1999		
Printed Name Print	11:12	<u> </u>	_			• •	-				
Printed Name ## 14-92 915-686-5424 Title Title Title Title	Sumanure 1.	un	_		Bv	0	RIGINAL	SIGNED	BY		
Prizzed Name Title SUPERVISOR, DISTRICT IP 26-14-90 915-636-5424 Title		MIKE, WILLIAMS									
8-14-90 8-5-565-5484	Printed Name		7	atle	Title	S	UPEŖVIS	OR, DIST	RICT IP		
Telephone No.		<u>. 91</u>			''''e_		عدد ويرد به ۱۰۰۰	J. C. C. S. G. Carrier Consulty	····		
			Telepi	ione 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.