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

## State of New Mexico Energy, Minerals and Natural Resources Department

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

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

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

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

OIL CONSERVATION DIVISION
P.O. Box 2088
JAN 1 8 1994

							14-/39-						
	SPENCE :								30	-015-27	7503		
	4849 Gro	Texas			Ste.	381							
Reason(s) for Fi	iling (Check prop	per box)						er (Please expl					
New Well	X			Change in	Transpor	ter of:	C-1	04 to 1	transpo	ort tes	t oil	was	
Recompletion			Oil		Dry Gas	, []	app	roved o	on July	7 29, 1	993.		
Change in Opera	ator		Casinghea	d Gas 🔲	Condens	ate 🗌	pre	viously	report v filed	and w	етт то	gs were	
change of oper nd address of pr	rator give name revious operator	-			-		•						
	PTION OF	WELL A	ND LEA	ASE	·				· · · · · · · · · · · · · · · · · · ·			····	
Lease Name				Well No.	[		ng Formation			of Lease	_	ease No.	
Unoca	l Feder	al <del>23</del>		1	N. H	lackbe	rry -	Yates ∽	SK State,	Federal or Fee	NM-4	350	
Location									,				
Unit I	LetterK		:16	50 <b>'</b>	. Feet Fro	om The $\frac{S_0}{S_0}$	outh Line	and 230	5 ' Fe	et From The _	West	Line	
Secti	ion 23	Township	19S	<del> </del>	Range	30E	, N	мрм,	Eddy	<del></del>		County	
	NATION OF		PORTE			NATUI							
	rized Transporter		$\overline{\mathbf{X}}$	or Conder	isale [		1	e address to w					
	Pipelin				-			ox 243					
	rized Transporter	r of Casingh	ead Gas	$\square$	or Dry (	Jas	Address (Giv	e address to w	hich approved	copy of this fo	orm is to be s	eni)	
	Pending		<del></del>										
If well produces		1	Unit	Sec.	Twp.		Is gas actuall	y connected?	When		_		
give location of tanks. K 23 19S							· · · · · · · · · · · · · · · · · · ·	The state of the s					
	u is commingled LETION DA		om any oth	er lease or	pool, give	e commingli	ing order num	ber:	·	<del></del>	<del></del>		
Designate	Type of Com	nletion -	(X)	Oil Well	G	as Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
	Type of Con	<u> </u>		1 X	!		X Total Davih	L	1	<u> </u>	L		
Date Spudded			•	pl. Ready to			Total Depth	) () I		P.B.T.D.	n 1		
6-22-93 1-12-94						1999'			1962'				
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation						Top Oil/Gas Pay			Tubing Depth				
	4' GL		<u>Ya</u>	tes			186	8'		1770			
Perforations										Depth Casin			
18	<u> 868' - 1</u>	880'					<u> </u>			199	<u>/ '                                   </u>	<del></del>	
	TUBING, CASING AND												
	<del></del>						CEMENTI		·	Τ			
	HOLE SIZE		CA	SING & T	UBING S			DEPTH SET	·		SACKS CEN	<del></del>	
1	7-1/2"		CA 13	SING & TI	UBING S		502	DEPTH SET	·	520 s	k-Circ	ulated	
1	7-1/2"		2A 13 8	SING & TI -3/8" -5/8"	UBING S		502 169	DEPTH SET	·	520 sz 450 sz	k-Çirci k-Circi	lated lated	
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1	7-1/2"	EQUES	CA 13 8 5 4	SING & TO -3/8" -5/8" -1/2"	UBING S		502 169	DEPTH SET 2 ' 7 '	·	520 sx 450 sx 100 sx	k-Çirci k-Circi	lated lated to 8-5/8	
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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.