STATE OF NEW MEXICO OF AND MITTIALS DEPARTMENT COLLAR DELIGION

OIL CONSERVATION DIVISION

P. O. HOX 2088

SANTA FE. NEW MEXICO 87501

Form C-104 Revised 10-1-70 RECEIVED

JAN 24'89

PERSONAL FOR ALLOWARIE

| OIL V | Λ | R ALLOWABLE .ND | _ | O. C. D. | | |
|--|---|--|-------------------------|--|--|--|
| TABLE OR THE BAS | AUTHORIZATION TO TRANS | PORT OIL AND NATURA | L GAS A | ARTESIA, OFFICE | | |
| CONSTIGNOUS CONSTITUTION OF THE CONSTITUTION O | | | | | | |
| BARBER OIL, INC. | | | | | | |
| P. O. BOX 1658 CARI | SBAD, NM 88221-1658 | Other (Please ex | - Nava I | | | |
| colon(1) for liling (Check proper bos | Change in Transporter of: | Olker / Fredie 4. | | | | |
| recompletion | OII E DIY G | ا التعقب | | | | |
| ivinge in Ownership | Conde | neote [] | | | teritoria de la compansión de la compans | |
| change of ownership give name | | | | | | |
| ed address of previous owner | | | | LC-0: | 29171-C | |
| SCRIPTION OF WELL AND | T.EASF. Well No. Pool Nome, Including f | otworrou I | ind of Lease | F PEDEDAI | L+0=+ : | |
| KEYES | 5 P.C.AYAT | res si | ate,) ederal | or Fee FEDERAL | | |
| . ecollos | NOPTH | and 990 | Feet From T | west | | |
| DAIL Letter E : 16. | 50 Feet From The NORTH LI | | EDDY | | Cour | |
| Line of Section 15 To | wnehip 20 SOUTH Range | 30 EAST , NMPM, | | | | |
| | TER OF OIL AND NATURAL G | AS Address (Give address to t | which approv | ed copy of this form is t | lo be sent) | |
| time of Authorized Transporter of On | or Condensate | | | mv 77951 | | |
| The Permian Corp. | Address (Give address to | which approve | ed ecry of this form is | o de semi | | |
| NONE | Two Bue. | N/A | Whe | h | | |
| it well produces oil or liquids, the location of tanks. | 7 115 20S 30E | NO | | | | |
| ive location is commingled wi | ith that from any other lease or pool, | , give commingling order n | umber: | | siv. Dill. B | |
| "OMPLETION DATA | Oil Well Gas Well | New Well Workover | Deepen | Plus Back Same Re | ! | |
| Designate Type of Completi | on – (X) | Total Depth | | P.B.T.D. | | |
| Date Compl. Ready to Prod. | | | | | Tubing Depth | |
| invations (DF, RKB, RT. GR, etc.) Same of Producing Formation | | Top Oil/Gas Pay | Top Oil/Gas Pay | | | |
| THE STATE OF THE S | | | | Depth Casing Shoe | | |
| · colorations | | THE PECOND | | | | |
| TUBING, CASING, AND | | DEPTH SET | DEPTH SET | | Pact ID-3 | |
| HOLE SIZE | CASING A TUBING SIZE | | | 1-27-89 | | |
| | | | | cha LTi d | | |
| | | | | N 10 00 00 00 00 00 00 00 00 00 00 00 00 | escood top | |
| TEST DATA AND REQUEST F | FOR ALLOWABLE (Test must be | after recovery of total volume depth or be for full 24 hours) | s of lood off | and P.S.I. B. Cyclin | | |
| - 17 AUFII | Date of Test | Producing Mathod (Flow, | pump, gas lij | (i, eic.) | | |
| First Non Cil Run To Tanks | | Casing Pressure | | Chare Size | | |
| eacts of Test | Tubing Pressure | | | Ger-MOF | | |
| Arryal Prod. During Teet | Oil-Bble. | Water - Bbls. | | | | |
| X-1001 P4001 C 111114 | | | | | | |
| | | Bble. Condensate/AMCF | | Gravity of Condensor | 1. | |
| GAS WELL | Length of Test | | | | | |
| | Tubing Piecewe (shut-in) | Cosing Pressure (Shut- | in) | Chate Site | | |
| colling moines, pitol, back proj | | 011 00 | NSERVA | TION DIVISION | | |
| CERTIFICATE OF COMPLIANCE | | | | the a secretarity | . , 19 | |
| | of the Oil Conservatio | APPROVED | | | | |
| Thereby certify that the rules and regulations of the Oil Conservation of the Silvinian have been compiled with and that the information given have is true and complete to the best of my knowledge and belief. | | r. BYOrig | BYOriginal_Signed_By | | | |
| | | TITLE | TITLE WINDS | | | |
| | , , , | 11 | | | | |

PRESIDENT

(Dute)

This form is to be filed in compliance with null 1104.

If this is a request for allowable for a newly drilled or dree well, this form must be accompanied by a tabulation of the devices taken on the well in accordance with MULE 111.

All sections of this form must be filled out completely for able on new and recompleted walls.

Fill out only Sections 1. II. III, and VI for changes of well name or number, or transporter, or other such change of con-

Separate Forms C-104 must be filed for each pool in membered wells.