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

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

Form C-104
Revised 1-1-89
Sib-lightructions
at Bottom of Page

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

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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	 Ç.,	la /				
F						

1000 Rio Brazos Rd., Aztec, NM 87410	REQUI	EST FO	OR AL	LOWAE	BLE AND	AUTHORIZ	ZATION				
I.						TURAL GA	AS				
Operator + TIMSTICALS							I API No. 30-015-23436				
Address	1.	. ;	1	_ .	0						
10. Eux 19.7	<u>, 1.0°</u>	, _k) .2 '		15/11	(A) (2) (1)	et (Please expid					
Reason(s) for Filing (Check proper box) New Well		Change in	Transpor	orter of:	Cub	a it ismas explo	ers)				
Recompletion	Oil		Dry Ga								
Change in Operator	Casinghead	Gas 🗌	Conde	nate 🗌							
If change of operator give name and address of previous operator Am	oco Prod	ductio	n Co	mpany,	P. O. Bo	ox 3092,	Housto	n, TX	77253		
IL DESCRIPTION OF WELL			15		- F		177: 1				
State IR	Well No. Pool Name, Including Fo							f Lease Lease No. V-232			
Unit Letter E	. 198	80	Foot Fr	rom The $\frac{Nc}{2}$	orth _{lim}	925	· Fa	et From The	West	Line	
	_ 21_0	c	_	27-1		мРМ,	Eddy	ariom inc.			
Section 23 Townshi	p 21-9	5	Range	2/-	<u> </u>			MALAN CORD	555 0 1 01	County	
III. DESIGNATION OF TRAN				D NATU					EFF 9-1-91		
Name of Authorized Transporter of Oil						address to which approved copy of this form is to be sent)					
Permian Corporation Name of Authorized Transporter of Casin					ox 1183. e address to wi		, TX 77001 copy of this form is to be sent)				
El Paso Natural Gas	_	أسسا	OI DIY			ox 1492.			<i>3</i>	 ,	
If well produces oil or liquids,			Twp.	Rge.	is gas actuali		When	?	0.6		
give location of tanks.	E		<u> </u>	27-E	Yes			1/20/	86		
If this production is commingled with that IV. COMPLETION DATA	from any othe	r lease or					-,				
Designate Type of Completion	- (X)	Oil Well	(Gas Well	New Well	Workover 	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl	. Ready to	Prod.		Total Depth	1. <u></u>	<u> </u>	P.B.T.D.		— <u>I</u>	
evations (DF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas Pay			Tubing Dep	Tubing Depth				
Perforations							Depth Casing Shoe				
	<u>ਜ</u>	UBING	CASI	NG AND	CEMENTI	NG RECOR	D.	<u>i</u>			
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET			SACKS CEMENT					
	-				 			1		· · · · · · · · · · · · · · · · · · ·	
							·····				
V. TEST DATA AND REQUES OIL WELL (Test must be after to	ST FOR A	LLOW	ABLE	oil and muss	he equal to or	exceed top alle	owable for thi	s depth or be	for full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Tes		J, 1000			ethod (Flow, pi			. ,		
Locath of Total	The birth D				Casing Press	ıne —		Choke Size			
Length of Test	Tubing Pressure		Casing Pressure								
Actual Prod. During Test	Oil - Bbls.		Water - Bbls.			Gas- MCF					
GAS WELL											
Actual Prod. Test - MCF/D	Length of T	est			Bbis. Condes	sate/MMCF		Gravity of	Condensate	•••	
Testing Method (puot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)		Choke Size						
VL OPERATOR CERTIFIC	CATE OF	COME	LIA	NCE			JOED!	ATION	רוויוים		
I hereby certify that the rules and regul	lations of the	Oil Conser	vation			OIL COM	NOEHV.	ATION	אופואות	אוע	
Division have been complied with and is true and complete to the best of my		_	en abov	e	Date	Approve	ed	YAM	2 2 1981		
Cheryl J. Th	odis				D.,		ORIGINA	L SIGNED) BY		
Signature Cheryl L. Rhodes Asst. Admin. Analyst					MIKE WILLIAMS SUPERVISOR DISTRICT IF						
Printed Name 3/14/91		713/ 5			Title						
Date		Tele	phone i	No.	1						

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.