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## State of New Mexico RECEIVE gy, Minerals and Natural Resources Departme

Form C-104	
Revised 1-1-89	
See Instruction	S
at Bottom of P	2

OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT (I P.O. Draw & DD, Artesia, NM	88210	AUG 04	'89	Sant
			- •	Sani

Santa Fe, New Mexico 87504-2088

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Santa Fe	T	P		١.
File	$\mathbf{I}^{-}$	V		1
File Transporter	Oil	-		ŀ
ransporter	Gas			
Operator		4		

I. Operator		'46 J   HK		$\neg \neg \top \cap \sqcup$	ANIC MIA	AUTHORI	A C	Operator			
		10 1117	ANSPA	JHT OIL	AND NA	TURAL G	AS Well A	PI-No.		<del></del> -	
Devon Energy Corpor	ation (	Nevada	) 🗸								
Address 1500 Mid America To	ower, 20	North	Broa	dway,	Oklahoma	City, C	Oklahoma	73102			
Reason(s) for Filing (Check proper box)			_	_	Oùh	et (Please expi	lain)				
New Well	0:1	Change in									
Recompletion	Oil Casinaha	_	Dry Ga Conden	_							
Change in Operator L	Casinghe	ad Gas	Conoci	IBIR [	· · · · · · · · · · · · · · · · · · ·				<del></del>		
and address of previous operator  II. DESCRIPTION OF WELI	ANDIE	ASE	········								
Lease Name	AND LE		Pool N	ame, Includ	ing Formation		Kind o	Lesse	L	ase No.	
Todd "23" Federal		1	1			ry Canyo	n State,	Federal or Fee	NM-04	05444	
Location	•		•								
Unit Letter O	:	660	Feet Fr	om The $\frac{SC}{C}$	outh Lin	e and16	<u>50</u> <b>Fe</b>	et From The	East	Line	
Section 23 Towns	hip 2	23S	Range	311	. N	MPM,	Eddy			County	
III. DESIGNATION OF TRA	NSPORTI			D NATU	RAL GAS				<del></del>		
Name of Authorized Transporter of Oil	X	or Conde	nsale		1		• • •	copy of this form		ni)	
Pride Pipeline Comp			or Dry	Can [	<del></del>				, Texas 79604  copy of this form is to be sent)		
Name of Authorized Transporter of Cas	ingness Cas		or Diy	Oas	Aumess (On	re acces 63 10 w	nach approved	copy of the join	,, D 20 06 36	, <b>-</b> ,	
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge.	Is gas actual	y connected?	When	?			
give location of tanks.	0	23	23s	31E	No						
If this production is commingled with the IV. COMPLETION DATA	at from any of	ther lease or	pool, giv	e comming	ling order num	ber:					
Designate Type of Completion	n - (X)	Oil Wel	1   0	Gas Well	New Well	Workover	Deepen	Plug Back  S	ame Res'v	Diff Res'v	
Date Spudded		npl. Ready to	o Prod.		Total Depth		l	P.B.T.D.		1	
Elevations (DF, RKB, RT, GR, etc.)	Name of I	Name of Producing Formation			Top Oil/Gas	Top Oil/Gas Pay			Tubing Depth		
Perforations								Depth Casing	Shoe		
		TUBING,	CASI	NG AND	CEMENT	NG RECO		1			
HOLE SIZE	CA	ASING & T	UBING S	SIZE	<u> </u>	DEPTH SE	<u> </u>	SA O J	CKS CEM	ENT	
			· · · · · · · · · · · · · · · · · · ·	<del></del>				7-11	1-89		
	_					·		0-11	bT:1	vPC.	
								2	~ , , ,		
V. TEST DATA AND REQUI	recovery of	ALLOW	ABLE of load	oil and mus	be equal to o	r exceed top al	lowable for thi	is depth or be for	full 24 hou	75.)	
Date First New Oil Run To Tank	Date of T				Producing M	lethod (Flow, p	ownp, gas lift, i	eic.)			
Length of Test	Tubing Pr	ressure		· · · ·	Casing Pressure			Choke Size			
Actual Prod. During Test	Oil - Bbls	- Bbis.			Water - Bbls			Gas- MCF			
GAS WELL								·			
Actual Prod. Test - MCF/D	Length of	Test			Bbls. Conde	omic/MMCF		Gravity of Co	ndensate		
Testing Method (pitot, back pr.)	Tubing P	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size			
VI. OPERATOR CERTIFI  I hereby certify that the rules and reg Division have been complied with, ar is true and complete to the beautiful.	ulations of the	e Oil Conse	rvation		11			ATION E		ON	
	Jacker				B <sub>V</sub>	Jahn	mes R	olins	on		
Signature J. M. Dyckworth, Printed Name			neer Title 235-36	511		OIL ANS	0				
August 2, 1989 Date	( 4		ephone 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.
   4) Separate Form C-104 must be filed for each pool in multiply completed wells.