	State of New Mexico ergy, Minerals and Natural Resources Depart t				с, ,	Form C-104 Revised 1-1-89 See Instructions	-1
DISTRICT I P.O. Box 1980, 110666, NM 88240 DISTRICT II	OIL CONSERVATION DIVISION P.O. Box 2088					at Bottom of Page	t
P.O. Drawer DD, Artesia, NM 88210 DISTRICT III	Sa		xico 87504-2088	: • · . :	17 1995		
1000 Rio Brazos Rd., Azzec, NM 87410 I.			LE AND AUTHORIZ	S see		\$ <i>//</i>	
Openior Bird Creek Resourc	•		S:	X BW T	<b>PINa</b> 30-015-25		
Address 1412 S. Boston Su	uite 500 Tuls	a, Okla. 74	119				
Reason(s) for Filing (Check proper box) New Well	······································		Other (Please expla	in)			
Recompletion	Oil 🗌	Transporter of:					
Change in Operator	Casinghead Gas	Condensate	<u></u>			<u></u>	]
and address of previous operator 11. DESCRIPTION OF WELL	AND LEASE	······································	· · · · · · · · · · · · · · · · · · ·	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	· · · · · · · · · · · · · · · · · · ·		
Lesse Name SKEEN	Well No.	L	ed Delaware 70		f Lease Pederal or Fee	Lease No.	
Location Unit LetterK	_:1750	Wy	outh Line and <u>198</u>	<u>0                                    </u>	et From The	West L	ine
Section 28 Townshi	i <b>p</b> 22S	Range 27E	, NMPM,	Edd	ly	Count	y
III. DESIGNATION OF TRAN	SPORTER OF O	IL AND NATU	RAL GAS				
Name of Authorized Transporter of Oil Pride Pipeline Compa	or Conder		Address (Give address to wh P.O. Drawer 29			n is 10 be sent) kas 79702-99	90
Name of Authorized Transporter of Casin Vented	ighead Gas	or Dry Gas	Address (Give address to wh				
If well produces oil or liquids,	Unit Sec.	Twp.   Rge.	Is gas actually connected?	When	?		
give location of tanks. If this production is commingled with that	K 28 from any other lease or	22S 27E	NO ing order number:				
IV. COMPLETION DATA	Oil Well		New Well   Workover	Deepen	Plug Back S	ame Res'v Diff Re	•'
Designate Type of Completion	- (X) X	i	Total Depth		X		
6-24-85	Dute Compl. Ready to Prod. 9-23-85		12,018		<b>P.B.T.D.</b> 11,765		
Elevations (DF, RKB, RT, GR, etc.) 3154 KB	Name of Producing Formation Delaware		Top Oil/Cas Pay 5266		Tubing Depth 5206		
Perforations 5266,5268,5270,5285			pf (18 holes		Depth Casing	Shoe .	
HOLE SIZE	CASING & TI	JBING SIZE	CEMENTING RECOR DEPTH SET		SA	CKS CEMENT	
<u> </u>		13.375		0-242 0-2037		surface surface	
9.5	7.62	7.625		0-9076		800	
6.5 V. TEST DATA AND REQUE		5" 8693-12,018 FOR ALLOWABLE			375		
-	recovery of total volume	•	be equal to or exceed top all			full 24 hours.)	
8/19/92		Date of TestProducing Method (Flow, pump8/19/92Pumping - rod			10.)		
Length of Test 24 hrs.	Tubing Pressure pumpin	-		Casing Pressure Vented		Choke Size	
Actual Prod. During Test 6 BO 29 BW	Oil - Bbls. 6		Water - Bbls. 29		Gas- MCF TSTM		
GAS WELL	~		I		L,		
Actual Prod. Test - MCF/D	Longth of Test		Bbls. Condensate/MMCF		Gravity of Condensate		
l'esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)		Choke Size		
VI. OPERATOR CERTIFIC I hereby certify that the rules and regu Division have been complied with and is true and complete to the best of my	ulations of the Oil Conse I that the information giv	rvation	OIL CON Date Approve	м	ATION D AY 2 4 19		
							h
Signature	i	Title	DISTRI	By ORIGINAL SIGNED BY TIM W. GUM			
Pilled Name Wade Alexander	Prod. S		Title			D , C	<u> </u>
$\frac{1}{10000000000000000000000000000000000$		ephone No. 7/3					ر الجا حکان

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.