ubmit 5 Copies oppropriate District Office DISTRICT I O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

SEP 07 '90

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS Designate Policy Polic	DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Sar	P.O. Bo nta Fe, New Me		1-2088	SEb Oly an			
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Name of Authorized Transporter of Casinghead Gas XEX or Dry Gas Address (Give address to which approach copy of that from a to be stent) Text of Title. P. 0. Box 730, Hobbls, New Mexico 88240 If well produces oil or liquide, price to a committed on the committee of this production is committingled with that from my other tease or pool, give committingling order number: V. COMPLETION DATA Designate Type of Completion - (X) Date Spadded		<u> AA</u>							
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Designate Type of Completion - (X) Date Speaded Date Compl. Ready to Prod. 6/22/90 8/03/90 8/20		from any other lease of	poor, give commungi	ng order name					
Date Spodded 6/22/90 8/03/90 8/03/90 83420' Tubing Depth 8360' 9-3/-32 Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Brushy Canyon, Delaware 8090' 041 8222' Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD TOBING, CASING AND CEMENTING RECORD TOBING, CASING AND CEMENTING RECORD 17-1/2" 13-3/8" 845' 800. sx - circ 210. sxs. 11" 8-5/8" 4394' 1340 sx - circ 250. sxi. 5-1/2" 8-7/8" N-80 6.5 EUE Tbg 8223' V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.) Date First New Oil Run To Task 8-03-90 8-25-90 Pump Ing Actual Prod. During Test OII - Bibls. On Pump Actual Prod. During Test OII - Bibls. Tubing Pressure Casing Pressure Chick Size VI. OPERATOR CERTIFICATE OF COMPLIANCE Interby certify that the nates and regulations of the Oil Conservation Division have been compiled with and that the information given above is true and complete to, the be of my knowledge and belief. VI. OPERATOR CERTIFICATE OF COMPLIANCE Interby certify that the nates and regulations of the Oil Conservation Division have been compiled with and that the information given above is true and complete to, the best of my knowledge and belief. VI. OPERATOR CERTIFICATE OF COMPLIANCE Interby certify that the nates and regulations of the Oil Conservation Division have been compiled with and that the information given above is true and complete to, the best of my knowledge and belief. VI. OPERATOR, CERTIFICATE OF COMPLIANCE Title Printed Name 9/06/90 915/682-6822			Gas Well	New Well	Workover	Deepen	Plug Back S	ame Res'v	Diff Res'v
Sacrations Sacratic Sacrati	Designate Type of Completion	-(X) XX	i			<u> </u>			1 / 5 0 4
Name of Producing Formation Sop Oil/Gas Pay Tubing Depth S223	Date Spudded	• •		•			1		
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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.