Submit 3 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Ariesia, NM \$8210

Ship of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088

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

KECEIVED

DISTRICT III 1000 Rio Brizce Rd., Astec, NM \$7410		۵	anta Le	, New N	Aexico 87:	504-2088		Д	UG - 9 19	993	
1.	REC	TRBU	OR AL	LLOWA	BLE AND	AUTHOR	IZATION	1	C. I. D.	T.	
Openior Bird Creek Resour	rces 1	- 1	AINSE.	<u>ONI OI</u>	L WIND MY	ATURAL C	We	TAPI No.		weis'	
Address	ices, 1	.nc. V		·····			30	0-015-26	622		
1412 South Bostor	ı, Suit	e 550,	Tulsa	. OK	74119						
Resson(s) for Filing (Check proper box)			-			her (Please exp	lain)		· · · · · · · · · · · · · · · · · · ·		
New Well		Change i	4 Товоро	rter of:	_	led in a		ice with	OCD Orde	ar No	
Recomplation Change in Operator	Oil Casloch	Hd Gas	Dry Ca	• <u>D</u>	R-	-9501 - B		ice with	OCD OIGE	:I NO.	
If change of operator give name and address of previous operator			Collona								
II. DESCRIPTION OF WELL	AND LE	EASE						~			
Lease Name	70112	Well No.	Pool N	me. Includ	ing Pormation		T V:-	of Lease			
Caviness Paine	ss Paine 4 East Lovin				-			of Lease No. Federal or Fee Fee			
Location		-	· ·		8 Drubily	Carryon			ree	: 	
Uali LeilerJ	_ !23	10	_ Peet Pro	m The 🚅	South Li	165	0	est From The	East	Line	
Section 15 Townshi	23 5	South	Range	28 Ea	st N	MPM, Ed	dy			County	
III. DESIGNATION OF TRAN	SPORTI	ER OF O	II. ANI	NATII	DAL CAS						
II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Authorized Transporter of OIL Or Condensate Addition (Girm addy ass to which approximate processing the condensation of Condensation								d copy of this	form is to be se	ent)	
(2) FOTT Energy, Inc.	2) EUTT Energy, Inc.					Address (Ciw address to which approved copy of P.O. Box 2436, Abilene, IX P.O. Box 4666, Houston, TX				,,,,,	
isme of Authorized Transporter of Callagheed Cas X or Dry Cas X Transwestern Pipeline					Address (Clive address to which approved copy of this form is to be sent)					IN)	
If well produces oil or liquids, ive location of tanks.	Il produces oil or liquids, Unit 3			Rge							
		15	1wa 23S	28E	Yes		i_	5/1/	91		
this production is commingled with that V. COMPLETION DATA	irom say o c	net 16696 Of	pool, give	oomming)	ing order num	pet:					
Designate Type of Completion	.00	Oil Well	0	e Well	New Well	Workover	Deepen	Plug Dack	Same Ree'y	Dist Reg'y	
Date Spudded	pl. Ready to	Ready to Prod.				<u> </u>	P.B.T.D.	<u>i</u>	<u> </u>		
ievalions (DP, RKB, RT, GR, etc.)	No en esta							r.b.1.D.			
	Name of Producing Formation				Top Oil/Oss Pay			Tubing Depth			
ectorations								Dupth Casing Shoe			
		NAGIS	OA CINI	A 43/10						•	
TUBING, CASING AN HOLE SIZE CASING & TUBING SIZE							<u> </u>				
	CV2ING & LORING 2156				DEPTH SET			SACKS CEMENT			
		·						 			
·											
TEST DATA AND REQUES	I FOR A	LLOWA	BLE								
IL WELL (Test must be after re	covery of to	ial volume o	load oil	and must b	be equal to or	tzceed top allo	wable for thi	t death ar he l	or full 24 hour	. 1	
ate First New Oil Rus To Task	Date of Ter	4			Producing Me	thod (Flow, pu	. જે. જે. જે. જે. જે. જે. જે. જે. જે. જે	ic.)	or / mi 2 + 7,0 m	<u>·/</u>	
ength of Tea	Tubing Pressure				Casing Pressu	· · · · · · · · · · · · · · · · · · ·		Choke Size			
						•		Citore 3126			
stual Prod. During Test	Oil - Bbls.				Water - Bbia.			Gas- MCF			
AS WELL			·	 !,			· · · · · · ·	<u></u>			
ciual Prod. Test - MCP/D	Longsh of T	adi	******		Bbls. Condens	WMMCF	~~~	Onvily of C	ondensale		
sting Mathed (pites, back pr.) Tubing Pressure (Shist-in)								•			
					Casing Pressur	(Shut-ia)		Choke Size			
I. OPERATOR CERTIFICA	TE OF	СОМРІ	IANC	E	^ 	-		I	~ -		
I hereby certify that the rules and regulation have been complied with and the	ons of the (Dil Conserva	tion	-	0	IL CON	SERVA	ATION [OIVISIO	N	
is true and complete to the best of my to	ghilages and	balief.	- · •		Date	Approved	AI	UG 111	993		

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Signature

Printed Name

7/23/93 Date

Н.

Ric Hedges

dist.

By

Title.

ORIGINAL SIGNED BY MIKE WILLIAMS

SUPERVISOR, DISTRICT II

President

Tille

582-7713
Telephone No.

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 recomplated well-