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State of New Mexico RECEIVE Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION
JUN 28 '89 P.O. Box 2088 STRICT II

Form C-104 Revised 1-1-89	Vx
See Instruction at Bottom of Pr	

CONCERN		San	nta Fe,	New Me	xico 8750	4-2088					
TRICT III O Rio Brazos Rd., Aziec, NM 87410	OFFOR	EST FO	R AL	LOWAB	LE AND A	UTHORIZ	ATION				
	ARCIC SING	O TRA	NSP(ORT OIL	AND NA	TURAL GA	S Well A	PI No.			
erator							ŀ		72		
Oryx Energy Compar	ly /						130	<u>_015-252</u>	/		
P. O. Box 1861, Mi	idland. T	'exas	7970	2							
eason(s) for Filing (Check proper box)					Othe	s (Please explai	n)				
w Well		Change in	Transpo	rter of:							
ecompletion	Oil	닏	Dry Ga			Salt Wate	r Dieno	ca1			
hange in Operator X	Casinghea		Conden								
change of operator give name d address of previous operator	ın Exploi	ation	& Pr	oductio	n Co.,	P. O. Box	1861,	Midland,	Texas	79702	
DESCRIPTION OF WELL	L AND LEA	ASE							1 - 1	ase No.	
ease Name Well No. Pool Name, Including							Kind of Lease State, Federal or Fee		NM16814		
Bedena Federal		1	Bru			are			Sair		
ocation	. 61	60	East Es	() The A	JEST Io nel i Lin	and205	5 Fee	t From The	East	Lin	
Unit Letter	76		, rea n	rotti ine					_	_	
Section 18 Town	ship 1/8-	S	Range	30-E	, N	MPM,	Eddy			County	
	NCDADTE	D OF O	IT AN	III NATII	DAT. GAS						
I. DESIGNATION OF TRA		or Conden	ILL ALV		Address (Giv	e address to wh	ich approved	copy of this for	m is to be set	પ)	
	ـــا										
lame of Authorized Transporter of Ca	singhead Gas		or Dry	Gas	Address (Gi	e address to wh	ich approved	copy of this for	m is to be se	nt)	
	\$ T3-:a	Sec.	Twp.	Rge.	Is one actival	y connected?	When	?			
f well produces oil or liquids, we location of tanks.	Unit	Sec.	l rwb	K&c	Is gas access	, comme					
this production is commingled with the	hat from any ot	her lease or	pool, gi	ve commingl	ing order num	ber:					
V. COMPLETION DATA									C Darke	Diff Res'v	
Designate Type of Completic	on - (X)	Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back	Same Kes'v	pili kesv	
Designate Type of Complete		pi. Ready to	o Prod.		Total Depth	<u> </u>	I	P.B.T.D.		_ 	
vare spanned					_						
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas	Pay		Tubing Depth			
					L			Depth Casing	Shoe		
Perforations							•	'			
		TUBING	, CAS	ING AND	CEMENT	NG RECOR	D				
HOLE SIZE		CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT		
								Yast	1111-3		
								6-	<u> 31-89</u>		
								she	op_		
		411011	ADI	· .					/		
V. TEST DATA AND REQU OIL WELL (Test must be aft	JEST FOR	ALLUW	ABLE	s i oil and mus	t be equal to o	r exceed top all	owable for the	is depth or be f	or full 24 hou	rs.)	
OIL WELL (Test must be aft Date First New Oil Run To Tank	Date of T		. 0, .0		Producing N	lethod (Fiow, p	ump, gas lift,	etc.)			
								Choke Size			
Length of Test	Tubing Pressure		Casing Pressure			Choke Size					
						Water - Bbis.					
Actual Prod. During Test	Oil - Bbl	5.									
					1		_				
GAS WELL Actual Prod. Test - MCF/D	Length o	f Test			Bbis. Cond	ensate/MMCF		Gravity of C	ondensate		
ACUM FIGURE 19901/D											
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size				
							····				
VI. OPERATOR CERTII						OIL COI	NSERV	ATION	DIVISIO	NC	
I hereby certify that the rules and	regulations of the	ne Oil Cons	ervation	l Nue		J JJ.					
Division have been complied with is true and complete to the best of	my knowledge	and belief.	IVEE ADO	,vc	Dat	e Approve	ed ee	JUN 2	g 1989 ————		
110						.c rippiove					
Many Flere	·				By.	(RIGINAL	SIGNED E	3Y		
Signature Maria L. Perez	}	Account	ant			V	MIKE WILL	LLAMAS	31		
Printed Name			Title		Titl	e	SUPERVIS	OR, DISTE	RICT 19		
6-26-89	91.	5-688-0)375		''''						

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

Date

- 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.

Telephone No.

- 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.