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Appropriate District Office
DISTRICT I
P.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

DISTRICT II P.O. Drawer DD, Antesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

I.

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

	The Gary-Williams Company								Well API No. 30 043 20722			
370 17th Street, Suite 5300, Denver, CO 80203								JU 043 20122				
eason(s) for Filing (Check proper box)		buu, De	iver,	, 60 8		e (Diana'		· · · · · · · · · · · · · · · · · · ·				
ew Well		Change is	а Тиалио	orter of:		r (Please expl Namo a		Image M				
scompletion	Oil		Dry Ga	$\overline{}$	operawi	. Name a	na Ada	iress Chang	ge			
ange in Operator	Casinghe	ad Gas 🔲	Conde	neate								
hange of operator give name Gar	y-Willi	ams Oi	l Pro	ducer,	Inc., 11	5 Inver	ness [	Dr.E.,Engle		YO 80112		
• •								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		30 00112		
DESCRIPTION OF WELL  ass Name	AND LE	Well No.	Pool N	ame, Includ	ing Formation		Ki	nd of Lease	1	ease No.		
San Isidro 13		11			uerco Mar	cos		te, Federal or Fige	_			
catios		000			a				- <del>-                                   </del>			
Unit LetterK	: <u>-</u>	.980	_ Feet Pr	rom The _	South Line	and	980	Feet From The	Wes	StLine		
Section 13 Townsh	2011		Range	3W	NR.	IPM.	Sando	oval		•		
	<u>p</u>		KARRE		, NIV	IPM,				County		
DESIGNATION OF TRAI	NSPORTE			D NATU								
ns of Authorized Transporter of Oil Condensate or Condensate					Address (Give address to which approved copy of this form is to be sent)							
ary-Williams Energy (		tion	D	<u> </u>				te 5300. I				
/A	TRICEG CAR		or Dry	Gas	Address (Give	: adaress to wi	hich appro	wed copy of this fo	erm is to be so	ent)		
well produces oil or liquids,	Unit	Sec.	Twp.	Rge.	is gas actually	connected?	W	hen ?		·		
location of tanks.		<u> </u>	<u> </u>		N/		i_					
is production is commingled with that COMPLETION DATA	i from any oti	her lease or	pool, giv	e comming	ling order numb	er:						
COMPLETION DATA		Oil Well	1 /	Gas Well	New Well	Workover	Desar	Diug Bash	Come Bosto	Diff Davis		
Designate Type of Completion	i - (X)	10" well		~40 TV EU	1 1454 461	44 OFFIAEL	Deeper	n Plug Back	Saine Res V	Diff Res'v		
e Spudded	Date Com	pl. Ready to	Prod.		Total Depth		<del></del>	P.B.T.D.		_1		
	ļ.	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
vations (DF, RKB, RT, GR, etc.)	Name of P											
orations							Depth Casing Shoe					
<del></del>								Depui Casing	ş Silve			
· · · · · · · · · · · · · · · · · · ·		TUBING.	CASI	NG AND	CEMENTIN	G RECOR	D		-			
1101 5 0135		CASING & TUBING SIZE			7	DEPTH SET			SACKS CEMENT			
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TEST DATA AND REQUE L WELL (Test must be after to First New Oil Run To Tank	ST FOR A	otal volume		oil and must	<u></u>			ft, etc.)	or full 24 hou	95.)		
TEST DATA AND REQUE	ST FOR A	otal volume est		oil and must	<u></u>				or full 24 hou	75.)		
TEST DATA AND REQUE L WELL (Test must be after to e First New Oil Run To Tank gth of Test	ST FOR A recovery of to Date of Te Tubing Pre	otal volume est		oil and must	Producing Met	chod (Flow, pu	mp, gas li	ft, etc.)	or full 24 hou	95.)		
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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.

