Submit 5 Copies 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

OIL CONSERVATION DIVISION

P.O. Box 2088

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

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

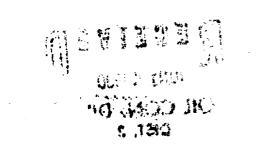
Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION

1.		IO IHA	MSP	JH I OIL	ANU NA	I UHAL GA					
OPERATOR FLOYD OIL COMPANY								Well API No. 30 - 039 - 22672			
Addense	•					_					
711 LOUISIANA, Reason(s) for Filing (Check proper bax)	STE 1	740	HO	LSTON	1,7× 7	7002	in)				
New Well		Change in			٠ ب	. (7				
Recompletion Dry Gas FFE: 7-1-90											
Change in Operator	Casinghead	d Cas	Conden	sate 🗶	<i>D</i> ()						
If change of operator give name and address of previous operator							····				
I. DESCRIPTION OF WELL AND LEASE											
Lease Name APACHE FEDERAL	_	Well No. Pool Name, Including 13E BASIN DA				Kind -	Kind of Lease State, Federal or Fee		TRIBAL #69		
Location											
Unit Letter K: 1650 Feet From The SOUTH Line and 1650 Feet From The WEST Line											
Section 7 Township 24N Range SW NMPM, RIO ARRIBA Count									County		
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS											
Name of Authorized Transporter of Oil or Condensate						Address (Give address to which approved copy of this form is to be sent)					
GIANT REFINING COMPANY						P.O.BOX 256 FARMINGTON NM 87499 Address (Give address to which approved copy of this form is to be sent)					
EL PASO NATURAL GAS COMPANY					P.O. BOX 1492 EL PASO, TX 79978					~)	
If well produces oil or liquids, give location of tanks.		Twp.	Rge.	is gas actuali			When ?				
If this production is commingled with that f	rom any other	er lease or s			ing order number	·		3-31-8	1		
IV. COMPLETION DATA											
Designate Type of Completion -	· (X)	Oil Well	(Gas Well	New Well	Workover	Doepen	Plug Back :	Same Res'v	Diff Res'v	
Date Spudded Date Compl		l. Ready to	Ready to Prod.			I	l <u></u>	P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Forma			ormation	nation Top Oil/Gas Pay			Tubing Depth				
Perforations					<u></u>	Depth Casing Shoe					
TUBING, CASING AND											
HOLE SIZE CASING & TUBING				SIZE	 	DEPTH SET		SACKS CEMENT			
											
V. TEST DATA AND REQUES	T FOR A	LLOWA	ABLE		1						
OIL WELL (Test must be after re	covery of lo	tal volume	of load a	oil and must	~	 			r full 24 how	·s.)	
Date First New Oil Run To Tank	Producing Me	ethod (Flow, pu	ımp, gas lift, e	etc.)							
Length of Test	Tubing Pressure			Casing Pressure		DE	ECETVED				
Actual Prod. During Test	Oil - Bbls.				Water - Bbis.			JUNI 4 1000			
GAS WELL	1					-,					
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF			CAN A Caldensate			
Festing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in) Choke Size						
·									· · · · · · · · · · · · · · · · · · ·		
VI. OPERATOR CERTIFICATE OF COMPLIANCE						OIL CONSERVATION DIVISION					
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete_to the best of my knowledge and belief.					IIIN 1.4.1000						
RI					Date	Date Approved					
Signature Signature					By_		34				
JOHN N. BLACK EXE. VP Printed Name Title					Title		SUPER	VISOR DIS	TRICT	l 5	
6-15-90 713-222-6275 Date Telephone No.											

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.



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