Submit 5 Copies Appropriate District Office DISTRICT I P.O.Box 1980, Hobbs, NM 88240

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

DISTRICT III 100C RIO Brazos Rd, Aztec, NM 87410

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

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

<u>. </u>			1121131 311							 1		
Operator	~			ľ	Vell API	l No.						
MW Petroleum (orpo	rauon										
1700 LINCOLN, SUITE 1900, DENVER, CO 80203-4519												
Reason(s) for riling (Check proper box) Other (Please explain)												
New Well Change in Transporter of: Recompletion Oil Dry Gas Effective 01-01-94 Line 1994												
	Change in Operator Casinghead Condensate Classinghead Condensate											
f change of operator give name and address of previous operator												
II. DESCRIPTION OF WELL AND L	EASE	Inc. is se	lo tar	115	r-	rion	Kind of Lea		Lesse No. As-	ement		
Lease Name	,				luding Formation Kind of Lease uito Mancos, West State, Federa				l or Fee			
State CC Location		1	ruerto canqu	101	· ·	, , , , ,	otate, 1 c					
Unit Letter J : : 1650 Feet From The S Line and 21.00 Feet From The E Line												
Section 26 Township 24N Range 1W NMPM, Rio Arriba 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 to be sent) P. O. Box 256, Farmington, NM 87499									2			
Giant Refining P. O. Box 256, Farmington, NM 87499 Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form to be sent)									1			
El Paso Natural Gas Company						P. O. Box 4990, Farmington, NM 87401						
If well produces oil or liquids,		Unit Sec.	Twp. Rge.	Is ga	s actua	lly connecte	ed?	When ?				
give location of tanks.												
If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA												
Designate Type of Completion	- (X)	Oil Well	Gas Well	New	Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Date Spudded Date Compl. Ready to Prod.					Total Depth			P.B.T.D.	P.B.T.D.			
Elevations(DF,RKB,RT,GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Dep	Tubing Depth			
Perforations								Depth Casir	Depth Casing Shoe			
		T	UBING, CASING	AND (CEMEN'	TING RECO	ORD					
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET				SACKS CEMENT			
							_ · · · ·		 	·		
V. TEST DATA AND REQUEST FOR ALLOWABLE												
OIL WELL (Test must be after recovery of total volume of load oil and must b												
Date First New Oil Run to Tank Date of Test					Producing Method (Flow, pump, gas lift, etc.)							
Length of Test	Tubing Pressure				ng Press	ure		Choke Size	Choke Size			
Actual Prod. During Test	Oil - Bbls.				r - Bbls	•		Gas-MCF	Gas-MCF			
GAS WELL	1,											
Actual Prod. Test-MCR/D Length of Test					Bbls. Condensate/MMCF				Gravity of Condensate			
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size	Choke Size			
VI. OPERATOR CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION												
hereby certify that the rules and regulations of the Oil Conservation							Date Approved JAN \O 1993					
- Jack Ch. Fe					1							
Signature JoAnn Smith Engineering Tech					By 3.1) Q							
Printed Name Title					Title SUPERVISOR DISTRICT #3							
12-15-93 (303) 837-5000												
Date					l							

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.