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Appropriate District Office
DISTRICT 1
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

DISTRICE II P.O. Drawer DD, Anesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.	TOTR	ANSPORT C	IL AND NATU	RAL GA	S				
Operator CENTRAL RESOURCES					Well API No.				
Address	J, INC.				_ _ `	3003906642	<u></u>		
1776 LINCOLN STR		DENVER, COL	ORADO 80203						
Reason(s) for Filing (Check proper b	•		Other (1	lease explai	n)				
Recompletion []		in Transporter of: Dry Gas	1						
Change in Operator X	Casinghead Gas								
f change of operator give name and address of previous operator	National Coope	rative Refi	nerv Associ	ation	PO Box	1404 Mc	Dharson	n VS 67/	
•		Idelve Reli	7,33001	<u>acron,</u>	10 00%	1404, 110		11, K3 074	
II. DESCRIPTION OF WE Lease Name		TB. IN.	P				·	····	
Candado	THE THOU PROOF TABLE, THE						nd of Lease Lease No. ste, (Federal) or Fee SF079161		
Location						<u> </u>	10.072	101	
Unit Letter M	. 450	_ Feet From The	South Line and	450	Fe	et Emm The	West	Line	
Castles 77 W						et i tom the		Line	
Section 3 Tou	vnship 26N	Range 7W	, NMPM	<u>. </u>		<u>Rio Arri</u>	<u>ba</u>	County	
II. DESIGNATION OF TR	RANSPORTER OF C	OIL AND NAT	URAL GAS					·	
Name of Authorized Transporter of C	Dif [] or Conde		Address (Give ad	bess to which	h approved	copy of this form	is to be see	พ)	
Gary-Williams Ener						5300, Den			
Name of Authorized Transporter of Casinghead Gas or Dry Gas \(\overline{\chi_{\text{N}}} \) El Paso Natural Gas								ns)	
		Twp. Rge	PO BOX 1492, E1 Pas						
ive location of tanks.		1 1	ves			195	5		
this production is commingled with	that from any other lease or	r pool, give commin	gling order number:						
V. COMPLETION DATA			,						
Designate Type of Complet	ion - (X)	II Gas Well	New Well W	якоver	Deepen	Plug Back Sa	ine Res'v	Diff Res'v	
Date Spridded	, <u>ii</u>	Date Compl. Ready to Prixt.		Total Depth		P.B.T.D.			
						1.0.1.0.			
Revations (DF, RKB, RF, GR, etc.) Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth			
erforations								·-·	
						Depth Casing S	lioe		
A COMPANY OF THE PARTY OF THE P	TUBING	. CASING AND	CEMENTING	RECORD		<u> </u>			
HOLE SIZE	CASING & T	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
				DECE!					
					- A N	11112			
				religion of the control of the cont	E .		·	·····	
. TEST DATA AND REQU	JEST FOR ALLOW	ABLE		<u>)) </u>	0.10	293			
IL WELL (Test must be af	ter recovery of total volume	of load oil and mu	it be equal to or exce	all of	161 Ri	dept at for	full 24 hour.	s.)	
Date First New Oil Run To Tank	Date of Test		Producing Method	(Flow, plury	P. ROY	1 Di			
ength of Test	Tubing Pressure		Casing Pressure	<i>#6</i>	COS	Choke Size			
			Producing Method (Flow, plump, gas 1996) Casing Pressure			Choke Size			
Actual Prod. During Test	Prod. During Test Oil - Bbls.		Water - Bbls.			Gas- MCF			
			_						
GAS WELL									
actual Pred, Test - MCF/D	Length of Test	Length of Test		Bbls. Condensate/MNCF		Gravity of Condensate			
esting Method (pitot, back pr.)	ng Method (pitot, back pr.) Tubing Pressure (Shut in)		Casing Pressure (Shut-in)			Charles Charles			
a was a moon for y	was treasure (500)	,	Casing Freezine (5	нш-тп)		Clicke Size			
I. OPERATOR CERTIF	ICATE OF COMI	PLIANCE	<u> </u>			<u> </u>			
I hereby certify that the rules and re	egulations of the Oil Conser	vation	∥ OIL	CONS	SERVA	TION DI	VISIO	Ν	
Division have been complied with a is true and complete to the best of a	and that the information giv	en above							
	/ / / / / / / / / / / / / / / / / / /		Date Ap	proved		JG 1 6 199	J 		
Stoll.	mit				7	\sim	_		
Signature Scott A. Smit	h V.P. Oper	ations/	By		، بارسان	. Cham	<u> </u>		
Printed Name	- op or	Tille Engeer	ing -:	ŞI	UPERVI	SOR DISTR	ICT #2)	
7/31/93 Date	(303) 830-010	0	Tille					*	
1.44.5	Tatz	phone No	11						

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.