Submit 5 Copies Appropriate District Office DISTRICT 1 P.O. Box 1980, Hobbs, NM 88240

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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

Operator	TOTE	RANSPORT OF	L AND NATURAL GAS	S Well API No.
CENTRAL RESOURCES	, INC.			3003921439
Addiess 1776 LINCOLN STRE	ET STE. 1010,	DENVER, COLO	ORADO 80203	
Reason(s) for Filing (Check proper bo			Other (Please explain	·)
New Well [_] Recompletion [_]	٠,	in Transporter of: Dry Gas		
Thange in Operator (X)	Casinghead Gas	· · · · · ·		
change of operator give name			nery Association	PO Box 1404, McPherson, KS 67
nd address of previous operator  L. DESCRIPTION OF WEI		STACTIVE RELLI	nery Association,	ro box 1404, Mernerson, RS 07
Lease Name		lo. Pool Name, Includ	ling Formation	Kind of Lease Lease No.
Candado 19 Otero Cha			<del>-</del>	State, Federal or Fee SF079161
ocation				
Unit Letter	: 1430	Feet From The _S	South Line and10	035 Feet From The West Line
Section 3 Town	nship 26N	Range7W	, NMPM,	Rio Arriba County
I. DESIGNATION OF TR				
Same of Authorized Transporter of Oi Gary-Williams Energ	E I	densale [XX]	Address (Give address to which 370 17th Street	h approved copy of this form is to be sent) , Ste.5300, Denver, CO. 80202
lane of Authorized Transporter of Ca		or Dry Gas XX		h approved copy of this form is to be sent)
El Paso Natural Gas				1 Paso, TX. 79978
well produces oil or liquids,	Unit   Sec.	Twp.   Rge.	Is gas actually connected?	When 7
ve location of tanks.	111	1	yes	1978
this production is commingled with the COMPLETION DATA	hat from any other lease	or pool, give comming	ling order number:	
	Oil W	Tell   Gas Well	New Well   Workover	Deepen   Plug Back   Same Res'v   Diff Res'v
Designate Type of Completion	on - (X)	1	The weat workered	Deepen   Plug Back   Same Res'v   Diff Res'v
ate Spaidded	Date Compl. Ready to Prixd.		Total Depth	P.B.T.D.
evations (DF, RKB, RT, GR, etc.)	Name of Producing	Formation	Top Oil/Gas Pay	Tubing Depth
erforations				
				Depth Casing Shoe
A SECURE OF THE PROPERTY OF THE PARTY OF THE	TUBING	G, CASING AND	CEMENTING RECORD	
HOLE SIZE	CASING &	TUBING SIZE	DEPTH SET	SACKS CEMENT
THE COURSE BEAUTY OF THE COURSE OF THE COURS			<u> </u>	21003
			118	1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
TEST DATA AND REQU	EST FOR ALLOV	VABLE	No.	and the terminal of the second
IL WELL (Test must be after		ne of load oil and must		ble for this depth or be for full 24 hours.)
ute First New Oil Run To Tank	Date of Test		Producing Method (Flow, pump	o, ĝaš lift, etc.)
ngth of Test	Tubing Pressure		Casing Pressure	Choke Size
ctual Prod. During Test	I Prod. During Test Oil - Bbls.		Water - Bbls	Gas- MCF
, and the second second	(711 - 1301s.		Water - Dolk.	Gas- MICL
AS WELL				
ctual Prod. Test - MCF/D	Length of Test		Bbls. Condensale/MMCF	Gravity of Condensate
			•	The second secon
sting Method (pitot, back pr.)	Tubing Pressure (5h	iut in)	Casing Pressure (Sliut in)	Clicke Size
I. OPERATOR CERTIF	CATE OF COM	IDLIANCE		
I. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above			OIL CONSERVATION DIVISION	
			•	
is true and complete to the best of it	ny knowledge and belief.		Date Approved	AUG 1 6 1993
Sant .	h.A			
Signature Signature			By	
Scott A. Smith	v.P. Ope	erations/	11	SUPERVISOR DISTRICT /3
7/31/93	(303) 830-01	Title Engeeri	Title	
Date		elephone 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.