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

NWPL

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Hixon Development Com	npany						Well A	IPI No.			
Address P.O. Box 2810, Farmin	ngton, Ne	ew Mexi	со	87499			\				
Reason(s) for Filing (Check proper box) New Well Recompletion	Oil		y Gas		Oth	er (Please expla	iin)				
Change in Operator	Casinghead (Gas 🔯 Co	ndensa	ate							
and address of previous operator	4 NID T 17 A	·									
II. DESCRIPTION OF WELL A Lease Name Marsha Bingham	Well No. Pool Name, Including				allup/Dakota State, 1			f Lease Lease No. Federal or Fee 117 Carilla			
Location Unit LetterA	450	Fee	et From	m TheN	orth Lin	and440	Fe	et From The _	East	Line	
Section 27 Township	, 26N	Ra	nge	3W	, NI	мрм, Ri	o Arrib	a		County	
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil		OF OIL		NATUI	Address (Giv	e address to wh			rm is to be se	nt)	
Giant Refining Co.					PO Box 256, Farmington, N.M. 87499 Address (Give address to which approved copy of this form is to be sent)						
	of Authorized Transporter of Casinghead Gas					PO Box 4990, Farmington, N.M. 87499					
If well produces oil or liquids, give location of tanks.	A		6N	Rge. 3W	Is gas actuall Yes			? Original connection to tember 28, 1987			
If this production is commingled with that if IV. COMPLETION DATA	from any other	r lease or pool	l, give	commingl	ing order num	ber:					
Designate Type of Completion	- (X)	Oil Well	G₂	ıs Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl.	Date Compl. Ready to Prod.				Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Pro	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth		
Perforations								Depth Casing	g Shoe		
	π	JBING, CA	ASIN	G AND	CEMENTI	NG RECOR	.D	<u> </u>			
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
									=1.7.5		
V. TEST DATA AND REQUES										,	
OIL WELL (Test must be after r Date First New Oil Run To Tank					be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lift					5 P	
Length of Test	Tubina Desar	T. 1.' D				Ire		Choke Size			
Length of Test	Tubing Pressure				Casing Press		n	SEP 2 5 1989			
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			OIL CON. D			
GAS WELL					J			D	IST. ?		
Actual Prod. Test - MCF/D	Length of Test				Bbls. Conder	isate/MMCF		Gravity of C	ondensate		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
VI. 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 is true and complete to the best of my knowledge and belief.					OIL CONSERVATION DIVISION SEP 2 5 1989 Date Approved						
Clern (tou	M	1	4	By_		3	الميد	<u> </u>	<i>i</i>	
Signature Aldrich L. Kuchera President/CEO Printed Name (505) 326-3325					Title	SUPERVISOR DISTRICT #3					
September 22, 1989 Date		(505) Telepho							· · · · · · · · · · · · · · · · · · ·		
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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.