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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

NO NO BIESO ROLLANDO	REQUEST FO	NSPORT OIL	AND NATURAL GAS	5		
perator				Well API No. 30-039-24052		
Giant Exploration &	Production (			30 037 24		
ddress P.O. Box 2810, Farmin	gton, New Me	xico 87499				
eason(s) for Filing (Check proper box)		Transporter of:	Other (Please explain	7		
cw Well		Dry Gas				
ecompletion L.J.	Casinghead Gas	Condensate		Effective J		
change of operator give name His	on Developme	nt Company,	P.O. Box 2810, F	armington, N.M.	87499	
a address of previous operator						
. DESCRIPTION OF WELL	AND LEASE	Pool Name, Includir	ne Formation	Kind of Lease	Lease No.	
case Name Marsha Bingham		NE Oilto	Gallup/ <i>DAK</i>	State, Federal or Fee	117	
ocation			/		East Line	
Unit LetterA	_ :	Feet From The No	orth Line and 440	Feet From The	East Line	
Section 27 Townshi	ip 26N	Range 3W	, NMPM,	Rio Arriba	County	
	ion operen of C	MI AND NATII	DAL CAS			
II. DESIGNATION OF TRAP  Name of Authorized Transporter of Oil	or Condo	nsate	Address (Give address to whi	ch approved copy of this for	rm is to be sent)	
Giant Refining	(XX)	L_J	PO Box 256.	Farmington . 1	M 87499	
Name of Authorized Transporter of Casir	ighead Gas [X]	or Dry Gas	Address (Give address to whi	ich approved copy of this for Farmington, N	rm is to be sent)	
Giant Exploration &	Production			When ?		
If well produces oil or liquids, ive location of tanks.	Unit   S∞.   A   27	Twp.   Rgc.   26N   3W	Yes		r 28, 1987	
this production is commingled with that		r pool, give comming	ling order number:			
V. COMPLETION DATA				Deepen Plug Back	Same Res'v Diff Res'v	
	Oil Wo	il Gas Well	New Well   Workover	Deepen   Plug Back		
Designate Type of Completion	Date Compl. Ready	to Prod.	Total Depth	P.B.T.D.		
Date Spudded	Date Compil storay to 1100.					
levations (DF, RKB, RT, GR, etc.) Name of Producing Formation			Top Oil/Gas Pay	op Oil/Gas Fay Tubing Depth		
				Depth Casin	g Shoe	
l'enorations						
	TUBING, CASING AND		CEMENTING RECOR	D .	SACKS CEMENT	
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMERY	
V. TEST DATA AND REQUI	ST FOR ALLOV	VABLE	a be excel to or exceed ton alle	mable for this depth or be i	for full 24 hours.)	
OIL WELL (Test must be after	recovery of total volun	ne of load oil and mus	Producing Method (Flow, pu	unp, gas lift, etc.)	m sur	
Date First New Oil Run To Tank	Date of Test		,	MEE	A R III	
Length of Test	Tubing Pressure		Casing Pressure	unp, gas lift, etc.)	100	
Enthal of Land			Water - Bbis.	TI O'SE MEI:	3 1990	
Actual Prod. During Test	Oil - Bbls.		At STC1 a Dolor		ON DIV	
	_1				ON. DIV	
GAS WELL	Length of Test		Bbis. Condensate/MMCF	GEVILY D	Shocasate	
Actual Prod. Test - MCI/D				Circle Pine		
l'esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)	Choke Size	•	
VI. OPERATOR CERTIF	ICATE OF COM	APLIANCE	OIL CO	NSERVATION	DIVISION	
I hereby certify that the rules and re Division have been complied with a	gulations of the Oil Cor	nservation .		JUL 0	3 1990	
Division have been compiled with a is time and complete to the best of r	ny knowledge and belie	ĩ.	Date Approve			
11	f .			7.456	Thank	
( g z. J.e.	June	<u> </u>	Ву	Dard",	DISTRICT 42	
Aldrich L. Kuchera		sident		SUPERVISOR	DISTRICT 13	
Printed Name	(50	5) 326-3325	Title			
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.