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Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Artesia, 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

DECLIEST FOR ALLOWARI F AND AUTHORIZATION

	TO TO			AND NAT	URAL GA	S					
•	10 IHA	ANSP	ON I UIL	VIAN IAVI	JI IAL GA	Well Al	1 No.				
Operator fine length on fi		30-045-05481									
Giant Exploration &	rroduction	OOmp	ully	 -			, 045 05	<u>_:~-</u>			
Address P.O. Box 2810, Farming	aton New Me	xico	87499								
	scon, new ne			Othe	(Please explai	n)					
Reason(s) for Filing (Check proper box)	Change in	Transn	orter of:		,	-					
New Well	·	Dry G									
Recompletion XX	Casinghead Gas				Effe	ective J	uly l,	1990			
	on Developme			P O Bo	2810. 1	arminet	on, N.M	. 87499)		
I change of operator give name Hixo nd address of previous operator	on neveropme	IIL U	ompany,	1.0. 10.	. 2010, 1						
I. DESCRIPTION OF WELL A	AND LEASE										
Lease Name						ng Formation Kind of					
Carson Unit	€ 43-	Bisti Lo	wer Gallup State F			ederal or fee NM 036254					
Garson ente	- 1 - 31	<u> </u>									
Location	. 1980	lina I	From The So	uth lim	and 660	Fcc	t From The _	East	Line		
Unit Letter		_ rea i	TOIL THE								
Section 10 Township	, 25N	Range	e 12W	, N	ирм, Sa	n Juan			County		
Section 10 Township	·	h									
III. DESIGNATION OF TRANS	SPORTER OF (IL A	ND NATUI	RAL GAS				 			
Name of Authorized Transporter of Oil	or Conde	nsate		Vomese lous	e address to wh				nu)		
Giant Refining	PO Box 256, Farmington, NM 87499										
Name of Authorized Transporter of Casinghead Gas X or Dry Gas					Address (Give address to which approved copy of this form is to be sent)						
F1 Paso Natural Gas Company					PO Box 4990, Farmington, NM 87499						
If well produces oil or liquids,	Unit Sec.	Twp.	Rgc.	le gas actuall	y connected?	When	7				
give location of tanks.	<u>i </u>		1	Yes							
If this production is commingled with that I	from any other lease o	r pool, g	give commingl	ing order num	ber:						
IV. COMPLETION DATA						1 6	Din = D1	Same Park	Diff Res'v		
	Oil We	:H	Gas Well	New Well	Workover	Deepen	Plug Back	Same Acs v	 		
Designate Type of Completion	- (X)	ـــــــــــــــــــــــــــــــــــــــ		Total Deal	l	L	PRTD	L	_l		
Date Spudded Date Compl. Ready to Prod.				Total Depth			P.B.T.D.				
				Tan Olivor	Day		Tubica Des	th.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing	Formati	Off.	Top Oil/Gas	. . y		Tubing Dep	ш			
				<u></u>			Depth Casir	ng Shoe			
Perforations							Julyan Cash				
					NG BEGGE	<u> </u>	.!				
				CEMENTING RECORD			SACKS CEMENT				
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			C. COLO GENERAL			
							 				
				ļ			-				
	CE FOR ALLO	VANI	F	1							
V. TEST DATA AND REQUES	ST FOR ALLOV recovery of total volum	v ADL	d all and more	the equal to a	exceed top all	owable for thi	s depth or be	for full 24 hou	ers.)		
OIL WELL (Test must be after t	recovery of total volum	ne oj 100	ia ou una musi	Producing N	ethod (Flow, p	ump, gas lift,	etc.)				
Date First New Oil Run To Tank	Date of Test			, towarding it							
	di li e B			Casing Pro		T W F	Cheke Size				
Length of Test	Tubing Pressure				10. 10 Br	il ft ta					
	O'I This			Water Ubli		1000	Gar MCF				
Actual Prod. During Test	Oil - Bbls.				JUL (3 1990					
	<u> </u>					N DIN	,				
GAS WELL				Bbis. Conde		V. DIV		Condentate			
Actual Prod. Test - MCF/D					LIS	r. 3					
					sure (Shul-in)		Choke Size		!		
Testing Method (pitot, back pr.)	Tubing Pressure (S		Casing Pies	oute (otton-in)				•			
				-\			.!				
VI. OPERATOR CERTIFIC	CATE OF COM	APLI.	ANCE		OIL CO	NSERV	ATION	DIVISIO	NC		
I hamby certify that the rules and regu	ulations of the Oil Cor	scrvatic	מס	11		1401114	, , , , , , , , ,				
Division have been complied with and	d that the information	given at	bove				0.0.400	20			
is true and complete to the best of my	knowledge and belie	ī.		Dat	e Approv	ed _JUI	<u> </u>	1U			
(1) . 1 1.											
10000	ule	4		Ву	_	3	\mathcal{A}_{-}	/			
Signature		n 1 d c	nt	"		7	- Chia	8			
Aldrich L. Kuchera		side Ti		7:11	ຸ ຣ	UPERVIS	OR DIST	RICT #3	l		
Printed Name JUN 2 2 1990	(50	5) 3	26-3325	Titl	<u></u>			<u> </u>			
Date		Telepho		ll .							
11316				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.