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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

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III

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

000 Rio Brazos Rd., Aztec, NM 87410	REQL	JEST FO	OR A	ALLO	WAB	LE AND	AUTHOF	NZ/	NOITA				
	TO TRANSPORT OIL AND							Well API No.					
Operator Giant Exploration &		30-045-25342											
Address P.O. Box 2810, Farming	gton, N	Vew Mex	cico	s 87	7499								
Reason(s) for Filing (Check proper box)  New Well  Recompletion  Change in Operator	Oil Casinghea	Change in	Trans Dry Cond	sporter o Gas densate				ect	ive Ju	ly 1, 19			
f change of operator give name Hixo	on Deve	elopmer	nt (	Compa	any,	P.O. Bo	x 2810,	F	armingt	on, N.M	87499	)	
I. DESCRIPTION OF WELL A	AND LEA	ASE											
ease Name Well No. Pool Name, Includin						State, I				f Lease Federal or Fee	Lease Lease No.  general or Fee SF 078056		
Central Bisti U	wer Gallup Federal					1 31 0	70030						
Location Unit LetterF	. 198	0	. Fect	From T	The _N	orth Lie	c and21	00	Fe	et From The _	West	Line	
5	25N				1 2		мрм,		an Jua			County	
Section 5 Township	2.51		Rang	gc	- 12	· · · · · · · ·	1911 1911		<u> </u>				
III. DESIGNATION OF TRAN	SPORTI	R OF O	IL A	ND N	IATUI	RAL GAS	ue address 'a	منطري	h appenued	copy of this f	orm is to be see	nt)	
Name of Authorized Transporter of Oil X or Condensate Giant Refining							Address (Give address to which approved copy of this form is to be sent) PO Box 256, Farmington, NM 87499						
Name of Authorized Transporter of Casinghead Gas  or Dry Gas						Address (Give address to which approved copy of this form is to be sent)							
El Paso Natural Gas	as Company					PO Box 4990, Farmington, NM 87499  Is gas actually connected? When ?							
If well produces oil or liquids, give location of tanks.	Unit	S∞c. I	Twp	p.   	Rgc.	ls gas actual Yes		•	, when	•			
If this production is commingled with that i	from any of	her lease or	pool,	give co	xuningl								
IV. COMPLETION DATA									Dearer	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	- (X)	Oil Well	ا ا	Gas '	Well	New Well 	Workover		ресреп	Find Dick	Dank Nes 4		
Date Spudded	Date Compl. Ready to Prod.					Total Depth				P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	:.) Name of Producing Formation					Top Oil/Gas Pay				Tubing Dep	Tubing Depth		
Perforations						Depth Casing Shoe							
1 CHAMINIO										<u> </u>			
	TUBING, CASING AND					CEMENTING RECORD				SACKS CEMENT			
HOLE SIZE	CASING & TUBING SIZE					DEPTH SET							
	<del> </del>												
										<del>- </del>			
TO MERCE DATE AND DESCRIPTION	T FOR	<u> XII OW</u>	ARI	.F.		L							
V. TEST DATA AND REQUES OIL WELL (Test must be ofter r	ecovery of	istal volume	oflo	ad oil a	nd must	be equal to o	r exceed top	allo	able for thi	is depth or be	for full 24 hou	rs.)	
Date First New Oil Run To Tank Date of Test							be equal to or exceed top allowable for this depth or be for full 24 howrs.)  Producing Method (Flow, pump, gas lift, etc.)						
	Tuking P	mraim				Casing Pres	D) É	6	218	Phol Fige			
Length of Test	Tubing Pi	icssuic					ĬŇ	<u> </u>	151 El C				
Actual Prod. During Test	Oil - Bbls.					Water - Bb	JU	L	6 1990	Gas Paris F			
	1					<u> </u>	OIL		N C	45.4			
GAS WELL	Landh of Tast					Bbls. Conde	nsate/MMÇI	<u> </u>	<u> </u>	Gravity of	Condensate		
Actual Prod. Test - MCF/D	Length of	Length of Test				( 5151.75							
l'esting Method (pitot, back pr.)	Tubing P	Tubing Pressure (Shut-in)				Casing Pres	sure (Shut-in	)		Choke Size	; 		
VI. OPERATOR CERTIFIC	ATEO	F COM	PLI	۸NC	E			71	SEDV	ΙΔΤΙΩΝ	DIVISIO	NC	
I hereby certify that the rules and regulations of the Oil Conservation							OIL U	۱۷	UL.17 V				
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.						Det	te Appro	יטטי	4	JUL	0 6 1991	J 	
is true and complete to the best of my	-10 loogo					Dai	re Abbro	ve(	ـــــــ اب		_/	/	
life & Challery						By.		_		<u> د بمند ع</u>	Cham	<b>{</b>	
Signature Aldrich L. Kuchera President									S	UPERVIS	OR DIST	AICT #3	
Printed Name 1 2 1 100 10 10 10 10 10 10 10 10 10 10 10						Titl	e						
Date				one No.									
2314						1	11.0	-					

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.