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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

<u>DISTRICT III</u> 1000 Rio Brazos Rd., Aziec, NM 87410	REQUEST FOR ALLOWABI	LE AND AUTHORIZATIO	N .
I.	TO TRANSPORT OIL	AND NATURAL GAS	
Operator		.   W	cil API No.
Giant Exploration & Pr	oduction Co.		0-045-27356
P.O. Box 2810, Farming	ton, N.M. 87499	Other (Please explain)	
Reason(6) for Filing (Check proper box)	Change in Transporter of:	Calci (i ieus capara)	
New Well	Oil Dry Gas	CONFIDENTI	N I
Recompletion	Casinghead Gas Condensate	COAFIBENTI	<del>\</del> L
Change in Operator Life change of operator give name	Campicad das Concensate		
and address of previous operator			
II. DESCRIPTION OF WELL A	Well No.   Pool Name, Including	ne Formation K	ind of Lease No.
Lease Name Famous Amos	1 Basin Fru	itland Coal S	Federal or Fcc NM 58890
Location	990 N	orth 1750	Foot From The West Line
Unit Letter	: Feet From TheN		_ ret riom mo
Section 31 Township	, 25N Range 10W	, NMPM, San Jua	an County
III. DESIGNATION OF TRANS	SPORTER OF OIL AND NATU	RAL GAS	this form is to be sent!
Name of Authorized Transporter of Oil	or Condensate	Address (Give address to which upp	
Name of Authorized Transporter of Casing	thead Gas or Dry Gas X	Address (Give address to which appr P.O. Box 4990, Farm	oved copy of this form is to be sent) ington. N.M. 87499
El Paso Natural Gas Co	).		Yhen ?
If well produces oil or liquids, pive location of tanks.	0	No	
If this production is commingled with that f	from any other lease or pool, give commingly	ing order number:	
IV. COMPLETION DATA	Oil Well Gas Well	New Well Workover Deep	en Plug Back Same Res'v Diff Res'v
Designate Type of Completion -	10	X	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
6-23-89	6-26-90	1630 Top OiVGas Pay	1585¹ Tubing Depth
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation Fruitland Basal Coal	1474'	1464
6705 GLE Perforations	Fidiciand basar coar		Depth Casing Shoe
1474' - 1490'	·		
1474	TUBING, CASING AND	CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
8-3/4"	7"	126.6'	50 sks
6-1/4"	4-1/2"	1624'	200 sks.
0-1/4	2-3/8"	1464'	
V. TEST DATA AND REQUES	T FOR ALLOWABLE	the sevel to an exceed top allowable for	or this depth or be for full 24 hours.)
OIL WELL (Test must be after r.	ecovery of total volume of load oil and must	Producing Method (Flow, pump, gas	lifi, etc.)
Date First New Oil Run To Tank	Date of Test		
Length of Test	Tubing Pressure	Casing Picture	Choke Size
·		Water - Bbls	Gas- MCF
Actual Prod. During Test	Oil - Bbls.	Water - Bois	2 L V
		Day, 2	
GAS WELL Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test - MC17D	24 hrs.		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
	1	1	1/8"
VI. OPERATOR CERTIFIC	CATE OF COMPLIANCE	OIL CONSE	RVATION DIVISION
I hamby 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.		Date Approved SEP 1 7 1990	
		1	
Signature		ByORIGINAL SIGNED BY ERNIE BUSCH	
	ice President-Exploratio	Title DEPUTY	OIL & GAS INSPECTOR, DIST. #3
Printed Name 3 1990	(505) 326-3325	11116	
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
- 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.