Submit 5 Cories
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 III 1000 Rio Brazos	Rd., Aztec, NM	87410
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DISTRICT II P.O. Drawer DD, Artesia, NM 88210

ISTRICT III XXX Rio Brazos Rd., Aztec, NM 8741b	REQUEST FOR ALLOWA	BLE AND AUTHORIZATION	ON		
TO TRANSPORT OIL AND NATURA			Well API No.		
perator	-dustion Company		30-045-27749		
Giant Exploration & Pro	Sudection Company				
ddress PO Box 2810, Farmington	n, N.M. 87499	(0) (-1)			
cason(s) for Filing (Check proper box)		Other (Please explain)			
lew Well	Change in Transporter of:				
ccompletion	Oil Dry Gas	Effective Ju	ıly 1, 1990		
Thange in Operator XX	Casinghead Gas Condensate				
change of operator give name Hix	on Development Company	, PO Box 2810, Farmin	ngton, N.H. 67433		
a sources of previous officially					
. DESCRIPTION OF WELL A	Well No. Pool Name, Inclu	line Formation	Kind of Lease No.		
ease Name	D - 1744	uitland Coal	State, Federal or Fee B-11370-31		
<u>North Bisti Coal 32 Co</u>	m 2 basin 11	arciana obse	State		
ocation	Feet From The	outh Lipc and 790	Feet From The West Line		
Unit LetterM	Feet From the	Like and	_		
Section 32 Town:hip	p 26N Range 12	W , NMPM, San Ju	an County		
	THE PROPERTY OF STAND NAT	URAL GAS			
II. DESIGNATION OF TRANS	SPORTER OF OIL AND TALL	Address (Give address to which ap	proved copy of this form is to be sent)		
Name of Authorized Transporter of On			in the beauti		
Name of Authorized Transporter of Casing	ghead Gas or Dry Gas	Address (Give address to which a	proved copy of this form is to be sent)		
	Unit Sec. Twp. Rg	c. Is gas actually connected?	When 7		
If well produces oil or liquids,	Julia San				
this production is commingled with that I	from any other lease or pool, give commi	ngling order number:			
V. COMPLETION DATA			cepen Plug Back Same Res'v Diff Res'v		
	Oil Well Gas Well	New Well Workover D	cepen   Plug Back   Same Res v   Dill Res v		
Designate Type of Completion	- (X)	Total Depth	P.B.T.D.		
Date Spudded	Date Compl. Ready to Prod.	Total Depti			
TO BURN INC. CD. 44.	Name of Producing Formation	Top Oil Gas Pay	Tubing Depth		
Elevations (DF, RKB, RT, GR, etc.)	TABLE OF FROMING VIEW		Durch Cooling Shoe		
Perforations		,	Depth Casing Shoe		
101012012		THE PERCOND			
	TUBING, CASING AN	D CEMENTING RECORD	SACKS CEMENT		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET			
700115	TET FOR ALLOWARLE				
Y. TEST DATA AND REQUE	ST FOR ALLOWABLE recovery of total volume of load oil and n	nust be equal to or exceed top allowab	le for this depth or be for full 24 hours.)		
OIL WELL (Test must be after	Date of Test	Producing Method (Flow, pump,	gas lift, etc.)		
Date First New Oil Run To Tank	Date of Tex		103.50		
	Tubing Pressure	Casing Pressure	Choke Size		
Length of Test	Tuoing 1 100001		Gas- MCF		
D. J. D. Jan Tori	Oil - Bbls.	Water - Buls.	GIS- MCI		
Actual Prod. During Test					
GAS WELL	Length of Test	Libis. Condensate/MMCF	Gravity of Condensate		
Actual Prod. Test - MCI/D	Lengue or rest	C			
	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size		
Fosting Method (pitot, back pr.)					
	CATE OF COMPLIANCE	011 00110	EDVATION DIVISION		
VI. OPERATOR CERTIFICATE OF COMPLIANCE		OIL CONS	OIL CONSERVATION DIVISION		
I hereby certify that the rules and regulations of the Oil Conservation			OCT 1 2 1990		
Division have been complied with and that the internation gives about is true and complete to the best of my knowledge and belief.		Date Approved			
te note and company of the			300 Charl		
(be 1811 Course		– By	By		
Signature		-,	SUPERVISOR DISTRICT #3		
Aldrich L. Kuchera President		Title	3		
OCT 1 1 1990	(505) 326-3325				
Date	Telephone No.	alate and appropriate construction of a state for the construction of	make given in a processor a section of the contract of the con		
	70.200				

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

<sup>2)</sup> 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.