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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

DISTRICT. II P.O. Drawer DD, Artesia, NM 88210 DISTRICT III 1000 Rio Brazas Rd., Aziec, NM 87410

Santa Fe, New Mexico 87504-2088 QUEST FOR ALLOWARI F AND AUTHORIZATION

	T /		ALC: DO	DT OIL /	E AND AUTHORIZ AND NATURAL GA	S			
erator		<u>O Inai</u>	<u> </u>	111 0127		Well AP	l No.		
moco Production Company						300392	23341		
dress 1670 Broadway, P. O. F	3ox 800,	Denve	r, Co	olorado	80201 Other (Please expla				
ason(s) for Filing (Check proper box)		Change in '	l'iransport	ter of:	Uner (Flease explain	<i>~</i> ,			
w Well [_] completion	Oil		Dry Gas	. []					
ange in Operator	Casinghead								
hange of operator give name Tent	neco Oil	E & F	61	62 S. W	illow, Englewood	1, Colora	ado 8015	55	
DESCRIPTION OF WELL	AND LEA	SE				1		Lea	se No.
ase Name		Well No.	Pool Na	ne, Including	g Formation ((PICT CLIFFS)	FEDER	AT.	SF077	
AN JUAN 28-7 UNIT	<u></u> <u>P</u>	267]	BLANC	0 300111	(TICT CHITTE)				
Cation Unit Letter	182	20	Feet Fre	om The FSL	Line and 1850	Fee	From The F	EL	Line
Section 15 Townshi	_{ip} 28N		Range7	W	, NMPM,	RIO AR	RIBA		County
					DAT CAR				
I. DESIGNATION OF TRAN	ISPORTE	or Conden	L AN	LZI NIVATOR	Address (Give address to wi	tich approved	copy of this for	n is to be ser	u)
ame of Authorized Transporter of On	lJ							a is to be see	·
lame of Authorized Transporter of Casin	ighead Gas		or Dry	Gas X	Address (Give address to wo	uch approved o	<i>сору ој т</i> из <i>Јог</i> . ТХ 799	78	- /
L PASO NATURAL GAS CO	MPANY	Sec.	Twp.	Rge.	Is gas actually connected?	When			
well produces oil or liquids, ve location of tanks	i i		i	i		L_			
this production is commingled with that	from any oth	er lease or	pool, giv	ve commingli	ing order number:				
V. COMPLETION DATA		loil Wel		Gas Well	New Well Workover	Deepen	Plug Back	ame Res v	Diff Res'v
Designate Type of Completion	ı - (X)	i	i_		 	<u></u> _l	P.B.T.D.		-L
tate Spudded	Date Com	pl. Ready t	o Prod.		Total Depth		P.B. (.D.		
devations (DF, RKB, RT, GR, etc.)	ations (DF, RKB, RT, GR, etc.) Name of Producing Formation					p Oil/Gas Pay Tubing Depth			
'erforations	1						Depth Casing	Shoe	
		=			CEMENTING DUCO	PD			
					CEMENTING RECO	r L	s	ACKS CEM	ENT
HOLE SIZE		SING & T	UBING	J. L.					
					1		1		
. Sandrom B. emi. (KID DEMİ)	ret köb .	ÄĖLOÑ	ABLE				.]		
/. TÉST DATÁ AÑD REQUI	 EST FOR : r recovery of t	ÄLLOW	ABLF	oil and mus	i be equal to or exceed top a	llomable for the	is depth or be f	or full 24 hor	ws.)
ML WELL (Lest must be after	EST FOR a r recovery of the Date of T	total volum	ABLF e of load	oil and mus	t be equal to or exceed top a	llomable for the	is depth or be f	or full 24 hor	ws.)
ML WELL — (Lest must be after Date First New Oil Run To Tank	Trecovery of t	est	ABLF e of load) I oil and mus	t be equal to or exceed top a Producing Method (Flow, Casing Pressure	llomable for the	is depth or be field.) Choke Size	or full 24 hor	us.)
OIL WELL — (Lest must be after Date First New Oil Run To Tank	r recovery of t	est	ABLF e of load	oil and mus	Casing Pressure	llomable for th pump, gas lýt,	Choke Size	or full 24 hou	ws.)
OH, WELL — (Lest must be after Date First New Oil Run To Tank Length of Test	Trecovery of t	total volum est ressure	ABLF e of load	, l oil and mus	Producing wieaka (Fiber)	llomable for th pump, gas lýt,		or full 24 ho	vs.)
OIL WELL — (Lest must be after Date First New Oil Run To Tank	Date of T	total volum est ressure	ABLF e of load	d oil and mus	Casing Pressure	llowable for th	Choke Size	or full 24 ho	us.)
OH, WELL — (Lest must be after Date First New Oil Run To Tank Length of Test Actual Prod. During Test GAS WELL	Trecovery of I Date of T Tubing Pr	ressure	ABLF e of load) oil and mus	Casing Pressure	llowable for th pump, gus lýt,	Choke Size		vs.)
OH, WELL — (Lest must be affected first New OH Run To Tank Length of Test Actual Prod. During Test	Date of T	ressure	ABLF e of load	t oil and mus	Casing Pressure Water - Bbls. Bbls. Condensate/MMCF		Choke Size Gas- MCF Gravity of C		vs.)
OH, WELL — (Lest must be after Date First New Orl Run To Tank Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D	Date of T Tubing Pi Oil - Bbls	ressure	e of toad	, doil and mus	Casing Pressure Water - Bbls.		Choke Size		ws)
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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.