Subnut 5 Copies Appropriate District Office DISTRICT I P.O. Box 1980, Hobbs, NM 88240

PRICE OF LICEN MICHIGO 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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS													
Operator	rator								Well API No. 30-039-23804				
Robert L. Bayless	3							1		30-	039-2360)4	
P.O. Box 168, Far	rmingto	on, NM	874	499									
Reason(s) for Filing (Check proper box)						Outs	et (Please exp	زمنط					
New Well	Oil	Change in		usporter or:					D.C.		7 1 00		
Recompletion	Effective 7-1-90												
If change of operator give name and address of previous operator		d Gas											
		. 0.0			 -								
II. DESCRIPTION OF WELL	AND LEASE Well No. Pool Name, Including					ng Formation Kind o				Lease No.			
Jicarilla 491	l Wildcat G					i Siale. I			Federal or Fed	cont. 491			
Location					_		1.50	-			Foot		
Unit LetterJ	: <u>1585</u>	5	. Fea	t From The	<u>د _S</u>	South Lin	e and	<u> </u>	Fe	et From The .	East	Line	
Section 32 Township 28N Range 2W , NMPM, Rio Arriba County													
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil Or Condensate Address (Give address to which approved copy of this form is to be sent)											IAI)		
Name of Authorized Transponer of Oil X or Condensale Gary Williams Energy Corp.						P.O. Box 159, Bloomfield, NM 87413							
Name of Authorized Transporter of Casinghead Gas or Dry Gas X						Address (Give address to which approved copy of this form is to be sent)							
Robert L. Bayless						P.O. Box 168, Farmington, NM 87499							
If well produces oil or liquids, give location of tanks.	1				_	is gas actually connected? When				7/22/88			
If this production is commingled with that i		J 32 28N 2W				yes DHC-678				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
IV. COMPLETION DATA													
Designate Type of Completion	- 00	Oil Well		Gas We	ell	New Well	Workover	D	ecpea	Plug Back	Same Resiv 	Diff Resiv	
Date Spudded		pl. Ready to) Pro	4.		Total Depth	<u></u>			P.B.T.D.	L		
Date Spanner						~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~							
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation					Top Oil/Gas	Top Oil/Gas Pay				Tubing Depth		
Perforations											Depth Casing Shoe		
rendand													
	TUBING, CASING AND					CEMENTING RECORD					OLOUG OF WENT		
HOLE SIZE	CASING & TUBING SIZE					DEPTH SET				 	SACKS CEMENT		
	 									 -			
	 												
						I				<u> </u>			
V. TEST DATA AND REQUES OIL WELL (Test must be after r	ST FOR	ALLOW	ABI	LE d.ell.ene		he equal to a	e exceed ion a	llowab	le for thi	s depth or be	for full 24 ho	urs.)	
OIL WELL (Test must be after r Date First New Oil Run To Tank	Due of Te		oj ic	oga ou and	Muss	Producing M	lethod (Flow.	ритр,	gas lýt,	etc.)	<u></u>		
Date First New Oil Ruis 10 12m2	Date of 16st								E 4 V.	1 5- 0			
Length of Tes	Tubing Pr	PILESSO				Casing		5 1	MF	Chrose Size			
						Water Box	73 2.			MCF			
Actual Prod. During Test	Oil - Bhis	i.				T.O.	.1111.	6.19	390	,			
									2010				
GAS WELL Actual Prod. Test - MCF/D	Length of	Teu				Bbls. Cond	HARCE)N.		Gravity of	Condensate		
Actual Prod. 1884 - Michie	and gare or a second					DIST. 3							
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)					Casing Pressure (Shut-in)				Choke Size			
						ــــــــــــــــــــــــــــــــــــــ							
VL OPERATOR CERTIFIC	ATE O	F COM	PLI	LANCE				NS	FRV	ATION	DIVISION	NC	
I hereby 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	e Approv	ed.		JUL	A 1920		
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/_/	<u> </u>			7	_	∦ By_			3	<u>,, (</u>	Thomas		
Robert L. Bayless Operator									SUPE	RVISOR	DISTRIC	T #3	
Printed Name				ue 		Title				<u> </u>			
7/5/90		505/32 Te		2659 De No.									
Date		• •	-			- (1							

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.