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

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

OIL CONSERVATION DIVISION P.O. Box 2088

DISTRICT III

Santa Fe, New Mexico 87504-2088

1000 Rio Brazos Rd., Aztec, NM 87410	DEO	HECTE	\cap D	ALL OWA		AUTHOR	ZATION			,	
I.	HEU										
Operator	TO TRANSPORT OIL				Well 7			API No.			
Southern Union	Exploration Company										
Address		_									
324 Hwy US64,	NBU300	1	Far	emington,		01 her (Please exp	lain)				
Reason(s) for Filing (Check proper box) New Well		Change in	Tra	nsporter of:		iici (i tease exp	umy				
Recompletion .	Oil			y Gas							
Change in Operator	Casinghe	ad Gas	-	ndensate 🔯							
If change of operator give name											
and address of previous operator	4315 1 5	4.00								, " '	
II. DESCRIPTION OF WELL Lease Name	ol Name, Includ	ing Formation		Kind	of teams	L	ease No.				
Navajo C	Well No. Pool Name, Includi 2 Basin				=			Federal or Fe	• NOG065	511133	
Location								\smile	17		
Unit LetterL	_ :1	650	Fee	t From The	South	ne and9	90 F	et From The	West	Line	
Section 31 Townshi	ip 27		Rai	nge 8	,1	мрм,	San Jua	ı <u>n</u>		County	
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	SPORTE	or Conder					hich approved	copy of this	form is to be se	ent)	
ا ليا ا						Address (Give address to which approved copy of this form is to be sens)					
Giant Refining Company XXX Name of Authorized Transporter of Casinghead Gas or Dry Gas						Post Office Box 256 Farmington, NM 87499 Address (Give address to which approved copy of this form is to be sent)					
El Paso Natura		ffice Box		• • • •							
If well produces oil or liquids,	Unit	Sec.	Tw	p. XXX Rge.	ls gas actua	lly connected?	When	7	on; wir o	, COP	
give location of tanks.	1	<u> </u>	<u></u>	i	<u> </u>	 					
If this production is commingled with that IV. COMPLETION DATA	from any oll	her lease or	pool,	, give comming	ling order nun	nber:					
IV. COMPLETION DATA		Oil Well		Gas Well	New Well	Workover	Deepen	Plue Back	Same Res'v	Diff Res'v	
Designate Type of Completion	- (X)		i	Oas wen	I New West	Workerer	Deepen				
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 Depth			
Lienadous (D. 17616) (N. 1664)											
Perforations								Depth Casing Shoe			
		HIDING	<u></u>	CINC AND	CEMENT	INC DECOR	<u>.</u>	<u> </u>			
HOLE SIZE	TUBING, CASING AND CASING & TUBING SIZE				CEMENT	DEPTH SET			SACKS CEM	ENT	
HOLE SIZE	CASING & TOBING SIZE			DEF IN SET			O/10110 DEMENT				
	1			12. 1							
	TE EOD	11700	. D i	ic	<u> </u>			.1			
V. TEST DATA AND REQUES OIL WELL (Test must be after r					he equal to a	r exceed ton all	awahle for thi	t denth or he	for full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Te		oj io	ua on ana misi		lethod (Flow, p			, v. ,		
Date I have the on Non-10 1 and	Date of Test					• •		ما اسا	i da co S	75 T	
Length of Test	Tubing Pressure				Casing Pressure			Chlorid Size	10 L 5	8 5	
				Water - Bbls.			Chi-WCF				
Actual Prod. During Test	Oil - Bbls.						DEC3 1 1991				
CACINELL	.1				l			Oli	COM	DIV	
GAS WELL Actual Prod. Test - MCF/D Length of Test						nsate/MMCF		Gravity of C	oudebeste.	<u> </u>	
								DIG (. 6			
esting Method (pitot, back pr.) Tubing Pressure (Shut-in)					Casing Pressure (Shut-in)			Choke Size			
				· · · · · · · · · · · · · · · · · · ·	l						
VI. OPERATOR CERTIFIC					,	OIL CON	ISERV	MOITA	DIVISIO	N	
I hereby certify that the rules and regulations of the Oil Conservation]	OIL OOI	1011117	-		/ I V	
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					Date	. A nnvaua	, D	263	33		
10, 1	a T				Date	e Approve	u	~ 1			
Inta / hush					By Stanker (C)						
Linda Murphy Office Supervisor					^{By} -	By South San					
Printed Name			Title		Title	SUPER	RVISOR D	ISTRICT	#3		
1/1/92	505/327					· · · · · · · · · · · · · · · · · · ·					
Date		Tele	phon	e No.	11						

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.