Submit S'Côpies
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

Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

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

·•	10	JIHAI	15PO	HI UIL	AND NAT	UHAL GA		Wi Nie			
penor Morgan Richardson Operating Company					Well API No. 30-045-28054						
Address		 		· ·. · · · · ·			1,				
	ngton, N	VIII 874	99		<u> </u>	/Dt 1 :					
Reason(s) for Filing (Check proper box)		N	P	6.	U Other	(Please explai	n)				
New Well		hange in T	ransport Dry Gas	eroi:							
Recompletion \square	Oil Casinghand	_	Ory Gas Condensa								
Change in Operator	Casinghead (Gas []	Condensa	ile []							
nd address of previous operator											
I. DESCRIPTION OF WELL A Lease Name			Pool Nan	ne Includir	ng Formation		Kind o	f Lease	le	ise Na	
Federal 14-14 96	1			itland C	oal		Scale, Federal or Eck		SF 078390		
Location A	1150)		N	orth	118	01		East		
Unit Letter	:		Feet From	m The	Line	and	Fe	et From The _		Line	
Section 14 Township	, 28N	.	Range	8W	, NM	IPM, Sa	n Juan			County	
III. DESIGNATION OF TRAN	SPORTER	OF OI	L AND	NATU	RAL GAS						
Name of Authorized Transporter of Oil	<u> </u>	or Condens				address to wh	ich approved	copy of this fo	orm is to be see	ਪ)	
Name of Authorized Transporter of Casing		<u> 25 </u>	or Dry C	·• (X)	Address (Cive	address to wh	ich annsaud	samu of this f	orm is to be se		
El Paso Natural Gas C				224	II .	Box 4990			VM 87499	<i>u</i>)	
If well produces oil or liquids,	ell produces oil or liquids, Unit Sec. Twp. R				Is gas actually	connected?	? _				
give location of tanks.	(mm. a.v. a.b.				No			Janua	ary 1991	•	
If this production is commingled with that IV. COMPLETION DATA	from any othe	r lease or p	pooi, give	commingi	ing order nume	er:	,				
	(V)	Oil Well	G	as Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion Date Spudded		L Pandy to	Pmd	Х	X Total Depth		<u> </u>	DRTD	<u> </u>		
9/2/90	Date Compl. Ready to Prod. 9/18/90				29421			P.B.T.D. 2901'			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top OlvGas Pay			Tubing Depth			
6332 GR	Fri	uitlan	d ———			2698 '		Depth Casin	2807'		
2698-2704, 2730-274	4, 2768-	-2784,	2790	- 2800.	2808-28	36. 2858	-2864	1 -	2942	•	
٨					CEMENTI			.,			
HOLE SIZE	CAS	SING & TL		IZE		DEPTH SET			SACKS CEM	ENT	
12 1/4"	8 5/8"				225'			190			
7 7/8"	4 1/2"			2942'			450				
	2 .	3/8"		2807'			 				
V. TEST DATA AND REQUE	ST FOR A	LLOW	ABLE		1,					·	
OIL WELL (Test must be after i				il and mus	t be equal to or	exceed top all	owable for/Th	is depth or be	for full 24 hou	rs.)	
Date First New Oil Run To Tank	Date of Tes	The state of the s		1/ 1/2		thod (Flow, p	emp gas lift.	ne f	•		
Length of Test	Tubia Per	ssure		~~~	Casing Press.			Choke Size	<u> </u>		
LD A D		DEC ₁			Water - Bbls.	NEC. 1	<u>/X </u>	Gas- MCF			
Actual Prod. During Test	Oil - Bbls.	IL CO	MC.	DIV	Marci - Doir	out	THE !	JIV.		٠	
GAS WELL	<u> </u>	1D	ST. 3	}			3:24. B		· · · · · · · · · · · · · · · · · · ·		
Actual Prod. Test - MCF/D	Length of				Bbls. Conden			Gravity of	Condensate		
Festing Method (pitot, back pr.)	l l	Hrs	(-in)		Carina Denne	ure (Chut in)		Choke Size			
Back Pressure		Tubing Pressure (Shut-in) 406 psig			Casing Pressure (Shut-in) 406 psig			3/4"			
VI. OPERATOR CERTIFIC	CATE OF	COMI	PLIAN	ICE					5000		
I hereby certify that the rules and regu					(OIL COI	NSERV	AHON	DIVISIO	אכ	
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					Deta Approved DEC 1 1 1990						
C -	A.O. ICOGO LA	no oction.			Date	a Approve	ed	7201	1000		
Signature Signature					By_	By Bull Change					
Dana Delventh	al, Ager	at`	Title				SUPE	RVISOR	DISTRICT	42	
November 6, 1	990	32	1116 26–41	.25	Title)				<i>F 3</i>	
Date		Tel	ephone h	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 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.