Submit 5 Copies
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

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

· Double		IO THAI	12 P	OHI OIL	AND NAT	UNALGA	Well A	Pi No.			
Operator Constraint Cons							- 1	30-045-28059			
Morgan Richardson Operating Commany Address							1 30-	045-280	<u> </u>		
P. O. Box 1915 Farm	ington,	Ma 877	35U								
Reason(s) for Filing (Check proper box)					Othe	r (Please explai	in)				
New Well		Change in 1		r—-							
Recompletion	Oil	_	Dry G								
Thange is Operator	Casinghea	d Gaz	Conde	nsuk []							
change of operator give name address of previous operator										<u> </u>	
I. DESCRIPTION OF WELL	AND LEA	ASE					·				
ase Name Well No. Pool Name, Include						1		Kind of Lease State, Federal or Fee		Lesse No. SF 080112	
Federal 41-8		2		sin Fru	itland C	ost			J Sr Ue	0112	
Location 14	127	() *	r . r	S	out! Line	1300	01: p.	et From The _	West	Line	
Unit Letter	_ :		reet r	roin the	Line	and	ro	et t.tom The -			
Section 8 Townshi	p 28N		Range	, aw	, NN	ирм, S	an Juan			County	
II. DESIGNATION OF TRAN	SPORTE			<u>UTAN DN</u>	RAL GAS	Ido 1	ial ==== -	comparable f	arm in to be a	#/1	
Name of Authorized Transporter of Oil		or Condens	sate .		Address (Give	e address to wh	uch approved	copy of this j	um is 10 DE SE	~)	
Name of Authorized Transporter of Casin	ghead Gus		or Dr	y Gas 🔀	Address (Give	e address to wh	nich approved	copy of this f	orm is to be se	nt)	
El Paso Natural Gas C				·	P. O.	Box 4990	Farmir	ngton, N			
If well produces oil or liquids,	nids, Unit Sec. Twp. Rg.			Rge.				Then ?			
give location of tanks.	<u> </u>	<u> </u>		<u>_</u> L	No			Marc	h 1991	·	
If this production is commingled with that	from any of	her lease or p	pool, g	pve comming	ling order numb	ber:					
IV. COMPLETION DATA		100000	,	Carly	N 111.11	Woden	1 0	Diva Pasts	Same Deck	Diff Res'v	
Designate Type of Completion	- (X)	Oil Well	 	Gas Well	New Well	Workover	Deepen	I LINE DECK	Same Res'v	المعتمدين ا	
Date Spudded		pl. Ready 10	Prod		Total Depth	l	L.,	P.B.T.D.	J		
11/14/90	1	Date Compl. Ready to Prod. 12/22/90				2481'			24391		
Elevations (DF, RKB, RT, GR, etc.)		Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth		
5901' GR	Fruitland Coal				20AAT 2/10			2341'			
Perforations 2110-2114, 2153-2158,					 8			Depth Casis	2481 '		
						NG RECOR	D.				
HOLE SIZE		TUBING, CASING AND CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT		
12 1/4"		\$ 5/8"				220-258			230		
6 1/4"		4 1/2"			2/01!			350			
	2 3/8"			Contract .							
								<u></u>			
V. TEST DATA AND REQUE	ST FOR	ALLOW	ABĻI	Ε					Com Call 24 has	1	
OIL WELL (Test must be after			of load	d oil and mus		exceed top allethod (Flow, pr			јог јші 24 поі	u 5.j	
Date First New Oil Run To Tank	Date of T	est			Producing M	eulou (riow, pi	muh' gaz ihi'	E16./	•		
Length of Test	Tubing P	Tubing Pressure				M 5 F	- F 1 V	Choke Size		· · · ·	
	Tuoming 1	. 505010			Casing Press	IN P	9 5 1 7	/ 5~ [[]]			
Actual Prod. During Test	Oil - Bbl	5.			Water - Bbls		3 E 100	Gas-		•	
	<u> </u>					FEE	3 1 5 199	4 .	. <u></u>		
GAS WELL						OIL	CON.	DIV			
Actual Prod. Test - MCF/D	Length o	Length of Test				Bbls. Condensate/MIMEF DIST. 6			Condensals		
285	 	Z4 hrs Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			1 -	i	
Festing Method (pitot, back pr.)	1 gaing F							· Choke Size			
Back Pressure	<u> </u>	300	O		-\r3	80		<u> </u>	3/8"		
VI. OPERATOR CERTIFIC						OIL COI	NSERV	'ATION	DIVISIO	NC	
I hereby certify that the rules and reg Division have been complied with an						J.L J J I	!				
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					MAR 1 8 1991						
•					Dat	e Approve	a		<u> </u>		
Wana Delucuthal							73.	()	2		
Signature					∥ _R y-	Ву					
Printed Name Title					77:41	•	SUPER	IVISOR D	ISTRICT	13	
2/13/91	(5 –4 1	125	Title						
Date			lephon							•	

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.