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Appropriate District Office
DISTRICT |
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 Brizos Rd., Aziec, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

		, LC	70 TO 4		OPT OU	AND NA	TURAL GA	AS				
•			IU IMA	NINOF	UNI UIL	- און טווא	O INC O	Wall /	PINA		<u></u>	
Sperator						•		l l	045-284	77		
<u> Incline</u>	Reserves.	Inc.						1 30-	UT			
Address			_		17.0 (4411		013-2	67-5033			
1603 SW	37th St		Top	eka.	KS 6	6611	es (Please expla		01 7033			
Reason(s) for Filing (Chec							n (rieme inte	/				
New Wall	X		Change is		7-1							
Rocompletios	Oil Dry Gus											
Change in Operator	J	Casinghe	d Cas	Conde	0126							
change of operator give r	13 me											
nd address of previous ope	relor										_	
I. DESCRIPTION	OF WELL A	ND LE	ASE						 _		N-	
Lease Name		Well No. Pool Name, Including			TMZS			Federal MODES CE 077107 B				
Federal 15		#2 Basin			in Frui	n Fruitland Coal			XIAM. Federal MCRAN SF 077107			
Location												
Unit Letter	N	. 129	90'	_ Feet F	roon The Sc	outh L	and151	10' Fe	et From The .	West	Line	
Unit Letter					•				Con 1	on	_	
Section 1	5 Township	28	N	Range	9 1	V , N	ирм,		San Ju	all	County	
II. DESIGNATIO	OF TRANS	SPORTE	R OF O	IL AN	ND NATU	RAL GAS				· · · · · · · · · · · · · · · · · · ·		
Name of Authorized Trans		<u> </u>	or Coade			Address (Giv	e address to w	hich approved	copy of this f	OF M 12 10 04 5	eni)	
		لسبب										
Name of Authorized Trans	porter of Casing	head Gas		or Dry	Cas 🔯		e address to w		copy of this f	orm is to be s	eni)	
El Paso	Gas				P. O. Box 4990 Farm:			ington, NM 87499				
If well produces oil or liquids,		Unit	Sec.	Twp	Rge.	is gas actuall	у совлюстви?	Whea				
give location of tanki-	 ▼		j	1	İ	NO		Ma	arch 15,	1991		
If this production is commu	ngled with that f	NOTE AND CL	her lease or	pool #	ve commine	ing order num	×r:					
IV. COMPLETION	DATA		,	F								
IT. COMPLETION	- VA 1A		Oil Wel		Gas Well	New Well	Workover	Deepes	Plug Back	Same Res'v	Diff Res'y	
Designate Type of	Completion -	· (X)	ION Wet	•	X X	X	, 			ĺ	i	
	Date Compi. Ready to Prod.				Total Depth				.			
Date Spudded			1 28/90	. , , , , , , , , , , , , , , , , , , ,			2380'			0'		
12/01./90 Elevations (DF, RKE, RT, GR, etc.)		Name of Producing Formation				1	Top Oil/Gas Pay					
						219			Tubing Dep 231	2'		
6022 GE	Fruitland Coal Seam				2170				Depth Casing Shoe			
	7'-57', 2287 <u>'</u> -2308'								2379'			
2196'-22	414 , 443	, -) '	7 LLUI	220	DIC AND	CEMENT	NC RECOR	D				
NO. E 0175		TUBING, CASING AND				DEPTH SET			SACKS CEMENT			
HOLE SIZE		CASING & TUBING SIZE			252'			210 sx reg				
12-1/4"		8-5/8" 20#				23801			400 sx Poz, 130 sx reg			
7-7/8"		4-1/2" 10.5# 1.900" 2.75#						- HOU SA FUZ, 130 SA TER				
		1.900" 2.			/ う#	2312'						
	A BASTES	T F 6 5	111 × 10	1011		1			J			
V. TEST DATA A	AD REQUES	IFOR	ALLUW	ABLE	2		anaaad taa cii	annabla fan iki	مدا مم دایم مای وز	for full 24 ha	wr.)	
	i musi be after re			of look	ou and mus	or equal to or	albed (Flore -	UMB BALLA	ec)	, , ,		
Date Firs New Oil Run T	Date of Test				Producing Method (Flow, pump, gas lyt, etc.)							
		ļ				Contract Date			ON.		IN THE FAIR	
Length of Test		Tubing Pressure				Casing Pressure			OF E	16 G 1	V G IIII	
						10/22 - 2011			DA- MCF			
Actual Prod. During Test		Oil - Bbls.				Matet - Roll	Water - Bola.			MAR 0 3 1991.		
		<u> </u>	····			1			I (A1)-	11 0 0 13	J 1	
GAS WELL	 	-							OH	CON	OW.	
Actual Prod. Test - MCF	D	Leagth of	Test			Bols. Conde	MMCF		Clarify of	September 1	ST V.	
407		24								DIST. 3		
Testing Method (pink, bac	k pr.)	Tubing Pressure (Shut-is)				Casing Pressure (Shus-in)			Choka Size			
back pr	300				300			1/2"				
		ATTE O			NCE	-						
VI. OPERATOR					1100		OIL COI	NSERV	ATION	DIVISION	NC	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information gives above												
Division have been complied with and that the information given source is true and complete to the best of my knowledge and belief.						Date ApprovedMAR 1.5 1991						
18 ILMS SUG COMPLETE TO THE DESIGN MY EDOMISORS AND DETRET.						Date	a wbblone	3U				
W/L						\parallel \sim \sim \sim \sim \sim						
I.VW						By But Chang						
J. P. Garrett Vice-President						SUPERVISOR DISTRICT /3						
Pripled Name				Tille		Title	1	JU1 61	UR 1	JIU I MIU I		
03/04/9	1		913-267				·					
Dine			Te	lephone	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.