Submit 5 Copies
Appropriate District Office
DISTRICT I
F.O. Box 1980, Hobbs, NM 88240

State of New Mexico nergy, Minerals and Natural Resources Depart Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

WALLAPING

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

TO TRANSPORT OIL AND NATURAL GAS

DISTRICT III
1000 Rio Brezos Rd., Azzec, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

Incline Reserv	eserves. Inc.					30-	30-045-28488			
Adress		Tanal	VC 4	6611		913-267-	-5033			
1603 SW 37th S asso(s) for Filing (Chair proper be		[opeka	, 10 0		her (Please exp	•				
A Mail		hange in T	nansporter of:_		•					
completice	Oil	`□ •	ny Cau	J						
ange in Operator	Casinghead (	Cas 🔲 C	ondensate _	]	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,		
hange of operator give name address of previous operator					<b>44</b> - 14 - 14 - 17 - 17 - 17 - 17 - 17 - 17			<del></del>		
DESCRIPTION OF WEI		E				Viad	of Lease	T	sas Na	
Federal 12	ral 12   Well No.   Pool Name, Included   Po			uitland C	Coal		XXXXX Federal SYDEK SF 077123			
rederat tz	/	· · · · · · · · · · · · · · · · · · ·								
Unit Lotter	1230	<u>'</u> F	est From The	South L	m 10418	340' r	ns From The	West	Line	
	aship 28 N			พ	OMPM.		San Jua	n	County	
Section 12 Tow	aship Z8 N	<u>K</u>	ange 9	<u>w</u>	M FM.			<del></del>	3.454.1	
. DESIGNATION OF TR		OF OIL		Address (G)	w address to w	vhich approved	l copy of this for	m u to be 16	IN)	
Name of Awhorized Transporter of Casinghead Cas  or Dry Cas  \( \times \)  El Paso Naturl Gas					Address (Give address to which approved copy of this form is to be sent) P. O. Box 4990 Farmington, NM 87499					
		• <del>•</del>	wp.   R		Is gas actually connected?  NO		Whee? March 15, 1991			
well produces oil or liquids, e location of tanks.		<del>~</del> ' '	יי ו ייניי יי ו ייניי							
his production is communited with COMPLETION DATA	that from upy other	lease or po	ol, give commi	agling order aut	xber:					
Designate Type of Complete	ion - (X)	Oil Well	Gas Well X	New Well	Workover	Despes	Plug Back  S	ame Res'v	Diff Resiv	
ie Spudded	Date Compt.			Total Depth	· · · · · · · · · · · · · · · · · · ·		P.B.T.D.	1!	<del></del>	
12/31/90		02/11/91			2315 Top Oil/Get Pay			2161'		
valions (DF, RKB, RT, GR, etc.) 5775' GR		Name of Producing Formation Fruitland Coal Seam			2074'			Tubing Depth 2137'		
erfornuosa								Depth Casing Shoe 2189 !		
2074'-88',2092' <del>-</del> 94'	,2097'-210	4',211	2'-14',2	146'-48'	2150'-60	)'	218	13 ·		
					CEMENTING RECORD			CKE CELI	FNT	
HOLE SIZE	CASIN	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT 250 sx reg		
12-1/4" 7-7/8"		4-1/2" 10.5#			2190'			400 sx Poz, 130 sx re		
7-778		1.900" 2.75#			2137'			177 011 177 111 11		
TEST DATA AND REQU	JEST FOR AL	LOWAL	LE					- 6 // 9d ha	aa 1	
	er recovery of local	volume of	load oil and m	Produce &	eurod (Flow, p	owedle for the	e depiñ or de foi	- Jul 14 NOW	(4-)	
te Fire New Oil Rus To Task	Date of Test			Ti Constag M	ivania (Liburi b	~·∀: <b>≬</b>	ME	0 2 1	LA DE	
ngth of Test	Tubing Pressu		<del></del>	Cause Press	ur•	····	a la	ULI	7 6	
•					·· <del></del>					
tual Prod. During Test	Oil - Bbla			Water - Bols	Water - Bbis.			Car MCF MAR 2 1 1991		
AS WELL							OIL	CON	Div	
wal Frod Test - MCF/D	Leagth of Tee	Leagth of Teel			Bbls. Condenses/MMCF			Onviry of Condition		
375		24			(Control Control (Control)				·	
ung Method (pilot, back pr.)	1	Tubing Pressure (Shut-in)			Casing Presente (Shut-te) 460			2"		
back pressure		60 COV (P)	IANICTE		. i i ,		<u> </u>			
I. OPERATOR CERTIF					OIL COM	<b>USERV</b>	ATION D	IVISIC	N	
I hereby certify that the rules and r Division have been complied with	and that the reforms	MOS PYES	900A6		1		MAR 2.9			
is true and complete to the best of				Date	Approve	ed	MHK A' B	1331		
Do								1	•	
1. W.						<u> 3</u> :	<u>1) 8</u>	hand		
J. P. Garrett Prised Name		7	residen	By_ Title	1	SUPE	RVISOR	ISTRICT	E <b>4</b> 3	
03/04/91	91	<u> 3-267-</u>	-5033	.    • • • • •	· · · · · · · · · · · · · · · · · · ·					
Dite		Teleph	one 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.