Submit 5 Copies
Appropriate District Office
DISTRICT J
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. Drawer DD, Anesia, NM 88210		9.22			ox 2088		JΝ				
LUST RICT III 1000 Rio Drazos Rd., Aztec, NM 87410				Fe, New M							
I.	REQU	JEST F TO TRA	OR ANS	ALLOWAL PORT OIL	BLE AND	AUTHOR	IZATION AS				
Operator COLEMAN, OTL S	TO TRANSPORT OIL AND NATURAL GAS						Well	Well Al'I No.			
COLEMAN OIL & GAS, INC.							3004528599				
P O Drawer 3337 Farmington, NM						1 87499					
Reason(s) for Filing (Check proper box)						er (Please exp	lain)			······································	
New Well		Change in	Tran		\ <i>\</i>		··7				
Recompletion	Oil		Dry								
Change in Operator	Casinghea	d Gas	Con	densate							
If change of operator give name and address of previous operator				***							
II. DESCRIPTION OF WELL	AND LEA	ASE									
Lease Name		Well No.	Pool	Name, Includi	ing Formation		Kind	of Lease		ease No.	
Campbell		Z,		sin Fruit	•	al		Federal or Fe		3035	
Location			-								
Unit LetterM	: 870)	. Feet	From The So	outh Lin	e and835	Fo	et From The .	West	Line	
Section ⁹ Township	27N		Ranj	13W	, N	мрм,	San Juar	1	***	County	
III. DESIGNATION OF TRAN	SPORTE	ROFO	H . A	ND NATE	DAL CAS						
Name of Authorized Transporter of Oil		or Conder	_~			e address to w	hich approved	copy of this f	orm is to be se	ni)	
Name of Authorized Transporter of Casing El Paso Natural Ga									•		
If well produces oil or liquids,	· · · · · · · · · · · · · · · · · · ·				P O Bo		When	gton, NM 87499			
give location of tanks.			,	, i Ngc.	in Bas account	y connected?	1	•			
If this production is commingled with that I IV. COMPLETION DATA	from any other	er lease or	pool,	give comming!	ing order num	ber:					
		Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	- (X)	ì	i	X	X	1	1			1	
Date Syndded	Date Comp	•	Prod	•	Total Depth			P.B.T.D.			
10/22/91	2/24/92				1425 ' Top Oil/Gas Pay			1385'			
Elevations (DF, RKB, RT, GR, etc.) 5964 GR	• • • • • • • • • • • • • • • • • • • •				1295'			Tubing Depth			
Perforations	5964' GR Basin Fruitland Coal							1325 Depth Casing Shoe			
1295'-1298' and 1302'-1308'								1425			
			CA:	SING AND	CEMENT	NG RECOR	RD				
HOLE SIZE	CAS	SING & TI	UBING	3 SIZE		DEPTH SET			SACKS CEM	ENT	
8-3/4"	7", 20#, J-55,ST&C				112'				65 sks, cl B, circulate		
_6-1/4"	4-1/2", 11.6#, K-55, STO							160 sks, cl B, circulat			
4-1/2"	2-3/8", 4.7#				1325	1325			Tubing		
V. TEST DATA AND REQUES	T FOR A	LLÖW	ĀŪĪ.	Ē	I			<u> </u>			
OIL WELL (Test misst be after r				•	be equal to or	exceed top all	lowable for the	irelanth mebe	for full 24 hay	or the same	
Date First New Oil Run To Tank	Date of Tes					ethod (Flow, p					
Length of Test	Tubing Pressure				Casing Pressure			Choic AUG 2 0 1992			
Actual Prod. During Test	Oil - Bbls.				Water - Bbla.			ONCON. DIV			
	OII - DOIS,				Water - Dois	•		OIF.	CON. I		
GAS WELL					1			J	DIST. 3		
Actual Frod. Test - MCF/D	Length of	lesi		 	This code			T 25.000 27			
10 MCF/D	24 hours				Bbls. Condensate/MMCF			Gravity of C	Loadensale		
Festing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size	Choke Size		
Back Pressure	490				60	•		.2			
VI. OPERATOR CERTIFIC	ATE OF	COMI	ZIA	NCE	11						
I hereby certify that the rules and regula	ations of the	Oil Conser	vation	1		DIL CON	ISERV	ATION	DIVISIO	N	
Division have been complied with and is true and complete to the best of my I	that the infor	mation giv	en abo	ove							
dl = l					Date	Approve					
Steone & Aleman					Original Signed by CHARLES GHOLSON						
Signature George E. Coleman Printed Name		Pre	side Title		By_						
3/3/92	(50	5) 327			Tille	DEPUTY CIT	R GAS IN	SPECTOR, D	51, #3		

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

3/3/92 Date

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.

Telephone No.

- 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.