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Appropriate District Office
DISTRICT J
F.O. Bax 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Furm C-104 Revised 1-1-89 See Instructions at Bottom of Page

DISTRICE II P.O. Drawer DD, Anesia, NM 88210 OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DIST RICT III 1000 Rio Brazos Rd., Azzec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.		TO TR	ANSF	PORT O	L AND N/	TURAL G	AS					
Operator Falcon Seaboard Oil Company						T			Weil API No.			
Address							300392064800S1					
Five Post Oak Park, Suite 1400, Houston, Texas 77027												
Reason(s) for Filing (Check proper box)					O.	nes (l'iease expl	ain)					
New Well Recompletion	Oil	Change in	n Transj Dry C									
Change in Operator X (2-1-9)	3) Casinghead	d Gas	Conde	ensale [
If change of operator give name Robert L. Bayless, P. O. Box 168, Farmington, NM 87499												
II. DESCRIPTION OF WELL AND LEASE												
Lease Name	ing Formation	ng Formation Kind o			of Lease No.							
Conoco 29-4 4 Choza Mes						T D 0			Federal or Fee NM 18323			
Location												
Unit Letter N	_ :	1100	_ Fed F	rom The	south Li	e and14	85 F	et From The	west	Line		
Section 24 Township 29N Range 4W ,NMPM, Rio Arriba County												
· · · · · · · · · · · · · · · · · · ·												
HI. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved cany of this form is to be really												
Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent)												
Name of Authorized Transporter of Casinghead Gas or Dry Gas X Address (Give address to which approved copy of this form is to be sent)										n)		
						295 Chipeta Way, Salt Lake City, UT 84158						
If well produces oil or liquids, sive location of tanks.	ls, Unit Sec. Twp. Rge.				ls gas actually connected? When yes			7-17-78				
this production is commingled with that	from any other	r lease or	pool, gi	ve comming		ber:		7-1	7-70			
V. COMPLETION DATA					- 							
Designate Type of Completion	- (X)	Oil Well	!	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Dist Res'v		
Date Spudded	Date Compl	. Ready to	Prod.		Total Depth	l	L	P.B.T.D.	L			
								1.5.1.5.				
evations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth				
еноганона								Depth Casing Shoe				
TUBING, CASING AND					CEMENTI	NG RECOR	D					
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET				SACKS CEMENT			
· · · · · · · · · · · · · · · · · · ·												
TEST DATA AND DECORE	.c. 67(1) 41	7.00										
'. TEST DATA AND REQUES OIL WELL (Test must be after re				oil and must	he equal to or	exceed top alla	unble for thi	e dewk or he l	Tae Gull 2d have)		
Date First New Oil Run To Tank	Date of Test		1000	on and must		thod (Flow, pu			or jul 24 how	2.)		
					עטן				WE!	f _Z .		
ength of Test	Tubing Pressure				Casing Pressure			Charle				
ctual Prod. During Test Oil - Bbls.				Water - Bbis.			MAR1 1 1993					
								OIL CON. DIV.				
GAS WELL					·	,			DIST.			
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/mMCF			Gravity of Condensate				
esting Method (pitot, back pr.) Tubing Pressure (Shut-in)					Casing Pressure (Sinul-in)				Choke Size			
I. OPERATOR CERTIFICA	ATE OF (COMP	LIAN	NCE .	\			.l				
I hereby certify that the rules and regulations of the Oil Conservation					OIL CONSERVATION DIVISION							
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					Date Approved MAR 1 11993							
$M \subset I$					Date	Date Approved						
_ mass					By Bin) Chang							
John M Sprowls Sr. Evaluations Engr.					SUPERVISOR DISTRICT #3							
Printed Name March 5, 1993 713-622-0055 Title					Title		SUPERV	USUR DIS	TRICT	3		
Date 1993			phone t	No.	''''		·					
		1616	Latente L	···.	JI.							

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 water