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 Hottom of Page

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

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

I.	REQUEST TO T	FOR ALL								
Operator		, , , , , , , , , , , , , , , , , , ,	11 011	<u> </u>	TOTIAL		API No.	22222		
Falcon Seaboard Oil	Company	···					300	3920784	+00S1	
Address Danie Cala Bamb	C	louaton '	Томпо	77027						
Five Post Oak Park, Reason(s) for Filing (Check proper bo.		ious con,	TEVES		or (Plane ave	lain)	······································			
New Well	•	e in Transporter	r of:		et (Please exp	шиј				
Recompletion	Oil	Dry Gas								
	-93) Casinghead Gas									
If change of operator give name and address of previous operator	Robert L. Ba	yless, P	. 0.	Box 168,	, Farming	gton, NM	87499			
II. DESCRIPTION OF WEL	·									
Lease Name Conoco 29-4	Well N		, Includi o Gal	ing Formation				of Lease Lease Federal or Fee NM 104		
Location				36416	e Federal or Fee NM 10431					
Unit Letter H	: 1710	Feet From	The	north Line	and800) F	et From The	east	Line	
Section 12 Town	nship 29N	Range	4W	, Ni	мрм,	Rio Arri	ba		County	
III. DESIGNATION OF TRA	ANSPORTER OF	OIL AND I	NATU	RAL GAS					•	
Name of Authorized Transporter of Oil	or Con	densate	7	Address (Giv.	e address to w	hich approved	copy of this for	n is to be se	ni)	
Gary Williams Energy	y Corp.		 	P. O.I	3ox 159,	Bloomfi	eld, NM 8	7413		
Name of Authorized Transporter of Ca Robert L. Bayless	singhead Gas	or Dry Gas					copy of this form is to be sent)			
If well produces oil or liquids, Unit Sec. Twp.				ls gas actually		When	gton, NM 87499			
give location of tanks.	Н 12	ii_) yes			7-31	-87		
If this production is commingled with the IV. COMPLETION DATA	hal from any other lease	or pool, give co	mmingli	ing order numb	er:					
Designate Type of Completic	on - (X)	'ell Gas '	Well	New Well	Workover	Deepen	Plug Back S	aine Res'v	Diff Res'v	
Date Spaidded	Date Compl. Read	to Prod.		Total Depth	-	.4	P.B.T.D.	-	-1	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing	Formation		Top Oil/Gas I	'ay		Tubing Depth			
Perforations			<u></u> l				Depth Casing Shoe			
· · · · · · · · · · · · · · · · · · ·	TIDINI	C CASING	AND	CEMENTA	IC PECOD	D				
HOLE SIZE		G, CASING TUBING SIZE		DEPTH SET	ט	- SA	CKS CEME			
		TODING CIEL			DC: 171 OC 1			OKS CEME	3141	
V. TEST DATA AND REQU	FST FOR ALL OV	VARIE					<u> </u>			
-	r recovery of total volum		nd must l	be equal to or	exceed top allo	owable for this	depth or hador	Æll 24han	ender I	
Date First New Oil Run To Tank	Date of Test	·		Producing Me					W :	
Length of Test	Tubing Pressure	Tubing Pressure			re		MAR1 1 1993			
Actual Prod. During Test	Oil - Bbls.			Water - Bbls.			GE-OIL	CON.	DIV	
GAS WELL								DIST.	3	
Actual Prod. Test - MCF/D	Length of Test			Bbls. Condens	ale/MMCF	 -	Gravity of Con	densate		
esting Method (pitot, back pr.)	Tubing Pressure (Si	iul-in)		Casing Pressul	re (Shut-in)		Choke Size	<u> </u>	•.	
				,—-						
VI. OPERATOR CERTIFI 1 hereby certify that the rules and reg Division have been complied with an	gulations of the Oil Con-	ervation	Ξ	C	OIL CON	ISERV	ATION D	IVISIO	N	
is true and complete to the best of m	y knowledge and belief.			Date	Approve	d <u>MA</u>	R 1 1 1993	<u>}</u>		
Signature M. S.	vols Sr. Evaluation			1						
John M. Sprowls Printed Name	· 	By SUPERVISOR DISTRICT #3								
March 5, 199		Title 22005	5	Title_						

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.

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Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

l.		TO TR	ANSP(ORT OI	L AND NA	TURAL G		·			
Operator Falcon Seaboard Oil	alcon Seaboard Oil Company								API No. 30039207840051		
Address Five Post Oak Park,	Suite	1400,	Houst	on, Te	xas 7702	7					
Reason(s) for Filing (Check proper box) New Well Recompletion Change in Operator [X] (2-1-9)	Oil 3)Casinghe	Change in	ם ביים ל			er (Please expl	•	, Orl	7		
change of assenter give name					Box 168,	Farming	ton, NM	87499	†		
I. DESCRIPTION OF WELL	AND LE	ASE									
Conoco 29-4	e Name Conoco 29-4 Well No. Pool Name, Includi 5 Basin				-			of Leare Leare No. NM-10431			
ocation	1 -	710	······································		north	8	00 _		east		
Unit LetterH	_ :	710	_ Feet Fro		north Lin	e and	F	eet From The		Line	
Section 12 Townshi		<u> </u>	Range	4W		мрм,	Rio Arr	iba		County	
I. DESIGNATION OF TRAN	SPORTE	or Conde		D NATU		e address to w	hich approve	d cany of this	form is to be se		
		Or Conde			Address (O)	201 137,	THEN UP TO VE	a copy of this f	OF 13 10 DE 32	<i>nu)</i>	
Name of Authorized Transporter of Casing	ghead Gas		or Dry	Gas 🗶		e address to w		l conv of this f	orm is to be se	ru)	
well produces oil or liquids, we location of tanks.	Unit H	Sec. 12	1wp. 29N	1 4W	ls gas actuall yes	y connected?	When	7-31	.–87		
this production is conuningled with that it. V. COMPLETION DATA	from any oti	ner lease or	pool, give	e commingl	ing order num	ber:			·····		
Designate Type of Completion	- (X)	Oil Well	G	as Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
ate Spaidded	Date Compl. Ready to Prod.			Total Depth	I	<u> </u>	P.B.T.D.	l	<u>.l.</u>		
evations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth				
ศักราชับงาร							Depth Casing Shoe				
HOLE SIZE	TUBING, CASING AND CASING & TUBING SIZE			CEMENTING RECORD DEPTH SET			SACKS CEMENT				
			·								
. TEST DATA AND REQUES	T FOR A	VII.OW	ANLE								
IL WELL (Test must be after re	covery of to	stal volume		il and must	,				COMPUTE HE	IN WE	
Date First New Oil Run To Tank	Date of Te	st			Producing Me	thod (Flow, pi	ump, gas iyi.	elc.)	P (i)	•	
ength of Test	Tubing Pre	essure			Casing Pressure			Choke Size MAR1 1 1993			
ctual Prod. During Test	Oil - Bbls.			Water - Bbis.			GIL MCOIL CON. DIV				
JAS WELL	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								,		
ctual Prod. Test - MCF/D	Length of Test			Bbls. Condensate/MMCF			Gravity of Condensate				
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size				
I. OPERATOR CERTIFICATION OF THE PROPERTY OF T	itions of the	Oil Conser	vation	CE		OIL CON)N	
is true and confinete to the best of my k	nowledge 1	nd belief.			Date	Approve	d	AR 1 1 19	33 		
Signature M. Suras					By Burs Chang						
John M. Sprowls Sr. Evaluations Engr. Printed Name Jule					SUPERVISOR DISTRICT #3						
March 6, 1993	71		-0055 ephone Ne	 υ.	Title					•	

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