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Appropriate District Office
C. CTP. CTT. P.O. Box 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

DISTRICT 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., Azzec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

i		וחו טו	MINS	or Uni Ui	L AND NA	I UNAL G	MO				
Operator								Well API No.			
Quintana Petroleu	m Serv	ices,]	Inc	<u> </u>				30-045-	-27936	·	
Address P. O. Box 3331.	House	ton, Tz	-	77253							
Reason(s) for Filing (Check proper box)	Hous	ton, 12	7.	11200	Out	es (Please expl	<u>ــــــــــــــــــــــــــــــــــــ</u>				
New Well		Change is	Tran	nsporter of:		,	•				
Recompletion	Oil	Ē.	Dry	Gas 🔲							
Change in Operator	Casinghe	ead Gas	Cor	densale 🗌							
If change of operator give name MC and address of previous operator	Kenzie	Methar	ne (Corp., 1	911 Main	, #255,	Durar	igo, Colo.	81301		
II. DESCRIPTION OF WELL	AND LF	EASE	···								
Lease Name		1	Poo	Name, Includ	-			ind of Lease are, (Peteral) or F	- lee o	Lease No.	
Hughes A	17 Basin I				1 Coar			ale, (Federal) or Fee SF-078049			
B	9	20			N	, 162	20		E		
Unit LetterB	_ :		_ Fed	From The	Lin	and		Feet From The		Line	
Section 33 Townshi	ip 291	N ·	Ran	ge 8W	. 10	ирм San	Juan	1		County	
	-			<u> </u>						County	
III. DESIGNATION OF TRAN	SPORT	ER OF O	IL A	ND NATU	RAL GAS						
Name of Authorized Transporter of Oil		or Conder	STATE		Address (Giv	e address to wh	uch appri	owed copy of this	form is to be s	ieni)	
					<u> </u>						
Name of Authorized Transporter of Casin El Paso Natural Gas	ghead Gas	xead Gas		hy Cas 💢	P. O. Box 4990,			Farmington, NM. 87401			
If well produces oil or liquids, give location of tanks.	Unii	Sec	Twr	. Rge.	is gas acquail; No	y connected?	l W	hes ?			
f this production is commingled with that	fmm any or	her leses or		give commissi	<u></u>						
IV. COMPLETION DATA	mon any oc	INCI ICAME UI	pou,	Sive consumity	ing order numb						
		Oil Well		Gas Well	New Well	Workover	Deepe	Plug Back	Same Res'v	Diff Resiv	
Designate Type of Completion	- (X)	1	i	X	1		, <i>J</i>	i ing back		j Kesv	
Date Spudded	Date Com	pl. Ready to	Prud	L	Total Depth		L	P.B.T D.	1		
10-7-90	5-24-91				2985			2938			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Cas Pay			Tubing Depth			
6339 GL	Fruitland Coal				2759			282	2820		
Perforations								Depth Casi	ng Shoe		
	<u></u>							<u> </u>	,		
10.5035	TUBING, CASING AND										
HOLE SIZE	CASING 4 TUBING SIZE				DEPTH SET				SACKS CEMENT 200		
12-1/4 7-7/8					266 2984						
N/A	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$				+				420 + 100 None		
IV/A	2 0/0, 4.17				2820			NOI	None		
V. TEST DATA AND REQUES	T FOR	ALLOWA	ABL	E	<u> </u>						
DIL WELL (Test must be after n					be equal to or	exceed top allo	mable for	this depth or be	for full 24 hos	wrs.)	
Date First New Oil Run To Tank	Date of Te					thod (Flow, pu			,		
									-		
Length of Test	Tubing Pressure				Casing Pressure			Charle Size	Charle Size		
	<u> </u>										
Actual Prod. During Test	Oil - Bbls.	•			Water - Bbis.			COTIZ :			
	1					······································					
GAS WELL								C/4			
Actual Prod. Test - MCF/D	League of	Tost			Bbis. Condens	MMCF		Gravity of C			
Terring Mathed (- i.e. but as	The second					<u>-</u>			m M. method abilities.		
esting Method (pilot, back pr.)	I nord 14	essure (Sout-	- iz)		Caung Pressu	re (Shut⊣a)		Choke Size			
(T. CDCD . TO . T	1										
VL OPERATOR CERTIFIC.					_	VII. CON	CED	VATION		.	
I hereby certify that the rules and regula	NOOT of the	Oil Conserv	ration	l		IL CON	SER	VATION	DIVISIO	אכ	
Division have been complied with and it is true and complete to the best of my k	Chowledge a	rmation give and halief	n abc	ove				OCT 1 4	1000		
					Date	Approved	t	OCT 14	1993		
· Thise In	ll								9		
Signature					By						
Steve Sandlin, Land Manager											
Printed Name	(71	3) 651-	Title	89	Title		SUPE	AVISOR DI	STRICT	#3	
Dute	(1)										
		i elet	phone	rvo.							

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.