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Appropriate District Office
DISTRICT |
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. Box 2088

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

DISTRICT III		Sa	nta Fe	e, Nev	w Me	exico 8750	14-2088			,				
1000 Rio Brazos Rd., Aziec, NM 87410						BLE AND NA			ION					
I. TO TRANSPORT OIL Operator ANOCO PRODUCTION COMPANY							Well				api no. 0450804700			
Address P.O. BOX 800, DENVER,	COLORA	DO 8020)1											
Reason(s) for Filing (Check proper box)						Oth	es (Please es	plain)						
New Well		Change in	Transp	orter of	ſ:	_								
Recompletion	Oil		Dry G											
Change in Operator		d Gas	-		X									
If change of operator give name					1771						, <u>.</u>			
and address of previous operator														
II. DESCRIPTION OF WELL	ANDIE	ASE												
Lease Name	Well No. Pool Name, Include				ing Engration Vind				of Lease No.					
HARE GAS COM B		1				OTA (PRORATED GAS)				Federal or Fe		anc 110.		
Location		L							L					
l G		1825				FNL		2330	_		FEL			
Unit Letter	- :		. red r	rom Th		UN	e and		F	et From The		Line		
Section 23 Township	29	N	Range	<u> </u>	11W	, Ni	мрм,		SAl	NAUL N		County		
III. DESIGNATION OF TRAN	SPORTE	'R OF O	II. AN	ID NA	TII	RAL GAS								
Name of Authorized Transporter of Oil		or Conden				1	e address to	which a	pproved	copy of this f	orm is to be see	nt)		
MERIDIAN OIL INC.							3535 EAST 30TH STREET, FARMINGTON, CO 87401							
Name of Authorized Transporter of Casing	chead Gas		or Dry	Gas [X						orm is to be set			
EL PASO NATURAL GAS CO	MPANY					P A B	OX 1492	. FT	PAS) TX 7	9978			
If well produces oil or liquids,	Unit	Sec.	Twp.	_	Rge.	is gas actually			When		7770			
give location of tanks.	<u>L</u>		.											
If this production is commingled with that if	rom any oth	er lease or	pool, gi	ve com	mingl	ing order numl	ber:					-		
IV. COMPLETION DATA														
		Oil Well		Gas W	ell	New Well	Workover	De	epen	Plug Back	Same Res'v	Diff Res'v		
Designate Type of Completion	- (X)	1	1_			1		İ	-	1	İ	Í		
Date Spudded	dded Date Compl. Ready to Prod.					Total Depth				P.B.T.D.	-			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation						Top Oil/Gas Pay				Tubing Depth				
Perforations										Depth Casing Shoe				
										<u> </u>		<u> </u>		
	,	UBING,	CASI	NG A	ND	CEMENTI	NG RECC	ORD	 .					
HOLE SIZE CASING & TUBING SIZE						DEPTH SET				SACKS CEMENT				
						'								
V. TEST DATA AND REQUES	T FOR A	LLOWA	ABLE											
OIL WELL (Test must be after re	covery of 10	tal volume	of load	oil and	musi	be equal to or	exceed top a	llowable	for this	depth or be	for full 24 haur.	s.)		
Date First New Oil Run To Tank	Date of Te	SI				Producing Me	thod (Flow,	pump, g	as lift, e	ic.)				
	ļ									· · · · · · · · · · · · · · · · · · ·	-6			
Length of Test	Tubing Pre	ssure				Casing Pressure				Choke Size 1				
											<u></u>			
Actual Prod. During Test	Oil - Bbls.					Water - Bbis.			P.	COAL- NICE	200			
	L							AI—	/	1. 21	730			
GAS WELL								n.	•]	יי אטן	Via			
Actual Prod. Test - MCF/D	Leagth of	l'est	_			Bbls. Conden	sale/MMCF			GMON	vadensate			
						01				- 081	73			
Testing Method (pitot, back pr.) Tubing Pressure (Shuk-in)					Casing Pressure (Shut-in)				Charlesize					
	l								-,	<u> </u>				
VI. OPERATOR CERTIFICA	ATE OF	COMP	LIAN	NCE		ے اا	NI 00	NICE	- N	A TION!	00/10/0	. K. I		
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						111 2 1990								
is true and complete to the best of my knowledge and betief.						Date	Approv	ed .	<u>J</u> l	UL Z I				
N111111.						1								
N. P. Whiley						By Tu Chang								
Signature						SUPERVISOR DISTRICT #3								
Boug W. Whaley, Staff Admin. Supervisor Finited Name Title								SU	PER\	ISOR DI	SINICI	-		
June 25, 1990 303-830-4280						Title.								
Date			phone N			H								

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.