Submit 5 Copies Appropriate District Office DISTRICT I P.O. Bax 1980, Habbs, NM 88240

<u>DISTRICT II</u> P.O. Drawer DD, Artesia, NM 86210

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

State of New Mexico

Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088 Sante Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Address 410 SEVENTEEN Resson(s) for Filing (Check proper			S, INC	9						
	TH STRE	EET, SUI	TE 140	00 – DE	NVER, C	OLORA	NDO 80	202		
New Well	box)	-	Chan	ge in Transporte	r of:		Other (Pleas	e explain)		
Recompletion	1	O#		Dry Gee						
Change in Operator	I	Casinghead Gas		Condensate						
If change of operator give name	UD DETD	OLEUM /	AMEDIC	ACL INC	5047.04	N EELIDI	r out	- 0000 1	10110701	
and address of previous operator <u>B</u> II. DESCRIPTION OF			AMERIC	A5), INC	., 5847 SA	N FELIP	<u>:, SUITE</u>	<u>: 3600, 1</u>	100810N	, TX 77057
Lease Name		Well No.	Pool Name	, including Form	etion		Kind of Les	•	100	ne No.
Miller Gas Com "B"		1		asin Dako			State			
Location Unit Letter P	:	840	Feet Fro	m The Sout	h Line and	790	Fe	st From The	East	Line
Section 20	Township	30N	Range	13W	,NMPM,		San Ju	ıan	c	county
III. DESIGNATION OF		ORTER OI	F OIL AN	ID NATU	RAL GAS					
Name of Authorized Transporter of O Giant Refining, Inc.	or Condensate			Address (Give address to which approved copy of this form is to be sent) P.O.Box 256, Farmington, New Mexico 87401						
Name of Authorized Transporter of C El Paso Natural Gas C	or Dry Gas			Address (Give address to which approved P.O. Box 990, Farmington						
If well produces oil or liquids, Unit give location of tenics.		Sec. Twp. 20 30 N		Rge. 13W	le gas actually connected? Yes			When? 5/11/65		
If this production is commingled with the IV. COMPLETION DATE		iesse or pool, giv	re commingling	order number:	-					
		Oil Wel	ll Ga	s Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Designate Type of Compl Date Spudded	etion - (X)	Date Compl. Re	eady to Prod.	<u>. </u>	Total Depth	<u> </u>		P.B.T.D.	<u> </u>	1
Elevations (DF,RKB,RT,GR,etc.)		Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth		
Perforations					Depth Casing Shoe					
	· · · · · · · · · · · · · · · · · · ·	TUBIN	IG CASI	NG AND		<u> </u>				
HOLE SIZE		CASING & TUBING SIZE			CEMENTIN	G RECUP	√D			
HOLE SIZE					CEMENTIN DEF	G RECOP 7TH SET	₹D	SAG	CKS CEMENT	
HOLE SIZE							ND	SA	CKS CEMENT	
HOLE SIZE							ξD	SA	CKS CEMENT	
HOLE SIZE V. TEST DATE AND R	REQUEST	CASING	G & TUBING	G SIZE			KD	SA	CKS CEMENT	
v. TEST DATE AND R		FOR ALL	G & TUBING	G SIZE		TH SET				
v. TEST DATE AND R		FOR ALL	G & TUBING	G SIZE	DEF	PTH SET		r be for full 24		
V. TEST DATE AND R OIL WELL (Tost must		FOR ALLO	OWABLE of load oil an	G SIZE	DEF	p allowable for	this depth o	r be for full 24		V
V. TEST DATE AND R OIL WELL (Test must) Date First New Oil Run to Tank		FOR ALL(OWABLE of load oil an	G SIZE	DEF	p allowable for	this depth o	r be for full 24		1993
V. TEST DATE AND R OIL WELL (Test moust) Date First New Oil Run to Tank Length of Test		FOR ALLO y of total volume Date of Test Tubing Pressure	OWABLE of load oil an	G SIZE	al to or exceed to Producing Meth	p allowable for	this depth o	r be for full 24		V
V. TEST DATE AND R OIL WELL (Test moust) Date First New Oil Run to Tank Length of Test Actual Prod. During Test		FOR ALLO y of total volume Date of Test Tubing Pressure	OWABLE of load oil an	G SIZE	al to or exceed to Producing Meth	p allowable for	this depth o	r be for full 24	JUN1 6	V
V. TEST DATE AND R OIL WELL (Test must) Date First New Oil Run to Tank Length of Test Actual Prod. During Test GAS WELL		FOR ALL(y of sotal volume Date of Test Tubing Pressur Oil – Bbis.	OWABLE of load oil an	G SIZE	al to or exceed to Producing Meth Casing Pressur Water Bbls.	p allowable for odd (Flow, pu	this depth o	r be for full 24	JUN1 6	V
V. TEST DATE AND R OIL WELL (Test must: Date First New Oil Run to Tank Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MCF/D Testing Method (outitm bacj or,)	be after recovery	FOR ALL(y of total volume Date of Test Tubing Pressur Oil — Bbis. Length of Test	OWABLE of load oil and	G SIZE	al to or exceed to Producing Meth Casing Pressure Water Bbls.	p allowable for cod (Flow, put	this depth o	Chester full 24 Gas - MCF Gravity of Co	JUN1 6	1993 1901
V. TEST DATE AND R OIL WELL (Test must: Date First New Oil Run to Tank Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test - MOF/D Testing Method (outlite bacj or,) VI. OPERATOR CERTI I hereby certify that the rules and r	IFICATE Cregulations of the	FOR ALL (y of total volume Date of Test Tubing Pressur Oil — Bbis. Length of Test Tubing Pressur	OWABLE of load oil an	G SIZE	al to or exceed to Producing Meth Casing Pressure Water Bbls.	p allowable for cod (Flow, put	r this depth o	charles of Control of	JUN1 6 L COM	1993 1901
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- 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 III.

 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.