Submit 5 Copies
Appropriate District Office
DISTRICT I
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

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.	TO	TRANS	PORT OIL	AND NATURA	AL GAS					
Operator DPODUCETON GO		Well A	1							
RODDY PRODUCTION CO	30-045				45-09477					
P. O. BOX 2221, FAR	MINGTON, N	EW MEXI	.co 87499	-2221					i	
Reason(s) for Filing (Check proper box				Other (Plea	se explain)	····				
New Well		ange in Tran	, [
Recompletion	Oil Casinghead Ga		Gas U							
f change of operator give name				EVEC TRUCT						
and address of previous operatorB	RADLEY H.	a MAKGA	KEI N. K	ETES TRUST			·			
I. DESCRIPTION OF WEL										
Lease Name PRICE					-			f Lease Lease No. Federal or Fee FEE		
Location		1 1	BIBO IIO	TORBO OBILLE						
Unit Letter K	1550	Fee	From The S	OUTH Line and _	1650	Fe	et From The	WEST	Line	
17 -	20M		1 1 7 7		CAN	****				
Section 1 / Town	ship 30N	Ran	ige 11W	, NMPM,	SAN	JUAN			County	
III. DESIGNATION OF TRA	ANSPORTER (OF OIL A	AND NATU	RAL GAS						
Name of Authorized Transporter of Oil		Condensate		Address (Give addre	ss to which	approved	copy of this f	orm is to be se	nt)	
No. of Analysis African Services										
Name of Authorized Transporter of Ca EL PASO NATURAL GAS	O WARRINAT GAG GG				85 (Give address to which approved copy of this form is to be sent) O. BOX 1492, EL PASO, TX 79978					
If well produces oil or liquids,	Unit S∞	c. Tw	p. Rge.	is gas actually conne		When		2270		
give location of tanks.		Ĺ				_ <u>i</u>				
If this production is commingled with the IV. COMPLETION DATA	at from any other le	ease or pool,	give commingl	ing order number:						
IV. COMILETION DATA	lc	il Well	Gas Well	New Well Worl	cover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion		1			.570.	Бесрей	l ling Dack	Same Res	l l	
Date Spudded	Date Compl. R	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Bred	icina Econol		Top Oil/Gas Pay				·		
Elevadons (DF, IND, NI, OR, Ele.)	Ivalle of Ficol	Name of Producing Formation						Tubing Depth		
Perforations		· · · · · · · · · · · · · · · · · · ·		J			Depth Casir	g Shoe		
				· · · · · · · · · · · · · · · · · · ·			<u> </u>			
LIQUE OUTE		TUBING, CASING AND								
HOLE SIZE	CASIN	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT		
										
V. TEST DATA AND REQU	FST FOR ALI	OWARI	r				<u> </u>			
_				be equal to or exceed	i top allowa	ble for thi	dep res bei	f 124 Provi	BURN FOR	
Date First New Oil Run To Tank Date of Test				Producing Method (Flow, pump, gas lift, etc.)						
		·								
Length of Test	Tubing Pressur	Tubing Pressure			Casing Pressure			Choke Size OCT1 9 1993		
Actual Fred. During Test	Oil - Bbls.			Water - Bbls.			Gas- MCF			
								1	v. ⊾ਾ≀ਾ ⊘	
GAS WELL								Disî.	. 9	
Actual Prod. Test - MCF/D	Length of Test	1		Bbls. Condensate/M	MCF		Gravity of G	Condensate		
esting Method (pitot, back pr.) Tubing Pressure (Shut-in)				75-12-15-12-16-1			Chake She			
rading resource (prior, order pr.)				Casing Pressure (Shut-in)			Choke Size			
VI. OPERATOR CERTIF	ICATE OF C	OMPLI	ANCE	11			1		**************************************	
I hereby certify that the rules and re	gulations of the Oil	Conservation	on	OIL	CONS	SERV	NOITA	DIVISIO	N	
Division have been complied with a is true and complete to the best of t			ove			•	- .			
is due with complete to the seat of f	ily knowledge and c	cher,		Date App	oroved	00	I 1 9 19	93		
Kenneth E.	Today						Λ			
Signature KENNETH E. RODDY		DECINES	Tr.	By	-3		- O la			
Printed Name 10/18/93	/	RESIDEN Tiu		T:41-	SU	PERVIS	OB Dies	RICT #3	Ç.	
	325	-5750		Title			VII 0101	mic1 #3	<u> </u>	
Date		Telephor	ne No.	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.