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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

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

OIL CONSERVATION DIVISION P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088

I.	HEC	JUEST	FOR A	LLOW	ABLE AND	O AUTHOR	RIZATIO	N			
Operator		1011	HANSP	ORTC	IL AND N	ATURAL	SAS				
LADD PETROLEUM CORP			W	Well API No.							
Address			300452384800S1								
370 17th Street, Su Reason(s) for Filing (Check proper bd	<u>ite 1700</u>	, Denv	er, Co	0 802	02-5617						
New Well	<b>x</b> )					ther (Please exp	olain)	<del></del>			
Recompletion	Oil	Change	in Transpo			•	,				
Change in Operator	=	ead Gas	☐ Dry Ga ☐ Condea								
if change of operator give name and address of previous operator			Conge	nere X	· · · · · · · · · · · · · · · · · · ·						
II. DESCRIPTION OF WELL Lease Name	L AND LE		<del></del>								
Federal "A"	Weil No. Pool Name, Inclu IE Basin Dal				ding Formation		Ki	nd of Lease	of Lease No.		
Location	Basin Da				Kota State			te, Federal or F	Federal or Fee SF07821		
Unit LetterO	:820	)	Feet Fr	om The	South	1750	)		East		
Section 25 Town	-L: 2 ON				———— Lii	ne and		Feet From The	Last	Line	
			Range			МРМ,	San J	uan		<b>C</b>	
III. DESIGNATION OF TRA	NSPORTE	ER OF O	IL ANI	) NATI	DAL CAC					County	
	1 1	or Conde	nsate		Address (Gi	e address to w	hich annual				
GARY WILLIAMS ENERGY CORP.  Name of Authorized Transporter of Casinghead Gas  or Dry Gae TY					Address (Give address to which approved copy of this form is to be sent) P.O. BOX 159, BLOOMFIELD, NM 87413						
Southern Union Gather	Gas X	Address (Give address to which approved copy of this form is to be sent)									
If well produces oil or liquids					-1.0 box 20400. Albuquerque NM 87125					25	
give location of tanks.	0	25	1 2022		is 8ss scristi	y connected?	Whe	n 7			
If this production is commingled with the IV. COMPLETION DATA	it from any oth	er lease or	pool, give	commingi	ing order num	ber;		August,	1980		
Designate Type of Completion	- (10)	Oil Well	Ga	s Weil	New Well	Waster					
Date Spudded		1	i		I wen well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
	Date Comp	d. Ready to	Prod.		Total Depth	<u></u>		P.B.T.D.	·		
Elevations (DF, RKB, RT, GR, etc.)	Name of Pr	Oducina Fo			7			r.b.1.D.			
Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth			
Perforations								D. I. C.			
								Depth Casing	Shoe		
HOLE SIZE	<u></u>	UBING,	CASINO	J AND	CEMENTIN	IG RECORE	)				
	CASING & TUBING SIZE					DEPTH SET		S	SACKS CEMENT		
								SHORE CEMENT			
V TEST DATA AND DEGLIS						<del></del>		<del> </del>			
V. TEST DATA AND REQUES OIL WELL (Test must be often	ST FOR AI	LLOWA	BLE	<del></del>		<del></del>		L	<del></del>		
OIL WELL (Test must be after a Date First New Oil Run To Tank	Date of Tor	zi volume o	fload oil d	and must b	e equal to or e	zceed top allow	able for thi	s depth or he to	e full 24 hours	<b>-</b> )	
	Date Of 162				Producing Med	nod (Flow, pum	p. gas lýt, e	ic.)	) MI 24 NOWS	·.)	
Length of Test	Tubing Press	aure .			asing Pressure			7 P (A)			
Actual Prod. During Test	Oil - Bbis.				Casing Pressure						
From During 12st					Water - Bbis.			Gas- MCF			
GAS WELL	L							SEP1	8 1990		
Actual Prod. Test - MCF/D	Length of Te							OIL CO	141		
	Conguitor (e	21		E	bls. Condensa	LE/MMCF			DN. DI	<u>v</u>	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Gravity of						
		ŕ				Casing Pressure (Shut-in)			Choke Size		
VI. OPERATOR CERTIFICA	ATE OF C	COMPL	IANCE	<u>-</u>							
I hereby certify that the filler and requisitions and an arrangement					Ol	L CONS	FRVA	TION D	11/10/04		
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					OIL CONSERVATION DIVISION						
1 1					Date A	pproved	:	SEP 191	<b>9</b> 90		
Muchael DBrown					· · · · ·						
Maria					By Bill Chang						
Printed Name					,						
7 Title Region-					TitleSUPERVISOR DISTRICT #3						
Date		Teleph	<u>wester</u> one No.	II Area	3						

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
- 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.