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

DISTRICT II	OIL CONSE	RVATION DIVISION	N at Bottom of Page
P.O. Drawer DD, Artesia, NM 882: DISTRICT III		P.O. Box 2088 ew Mexico 87504-2088	
1000 Rio Brazos Rd., Aztec, NM 8	7410		
I. Operator	TO TRANSPOR	OWABLE AND AUTHORIZ TOIL AND NATURAL GA	S
Address	Fatroleum Corp. Attn:	Ken E. White	Well A I No.
F.O. Box 212		2120	
Reason(s) for Filing (Check proper to New Well		Other (Please explan	n)
Recompletion Change in Operator	Change in Transporter of Oil Dry Gas Casinghead Gas Condensate	of:	
If change of operator give name and address of previous operator		turus.	
II. DESCRIPTION OF WE	I.I. AND I FASE		
Lease Name	Well No. Pool Name,	Including Formation	Kind of Lease Fed Lease No.
Location		nco Mesaverde	State, Federal or Fee SF 078508
Unit Letter	1000	Couth	
	rea rrom 1	ne <u>South Line and 1520</u>	Feet From TheEastLine
Section 12 Tow	riship 31N Range 91	, NMPM , S	an Juan County
III. DESIGNATION OF TR	ANSPORTER OF OIL AND N	ATURAL GAS	
Name of Authorized Transporter of O Giant Refining	or Condensate	Address (Give address to which	approved copy of this form is to be sent)
Name of Authorized Transporter of C	asinghead Gas or Dry Gas	P.U. Box 256,	Farmington, NM 87401
Gas Company of	New Mexico		approved copy of this form is to be sent) Bloomfield, NM 87413
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp.	Rge. Is gas actually connected?	When?
If this production is commingled with to IV. COMPLETION DATA	hat from any other lease or pool, give com	mingling order number:	Not Determined
- COM BETTON BATA	10:19:1		
Designate Type of Completic	on - (X) Oil Well Gas We	New Well Workover	Deepen Pug Back Same Res'v Diff Res'v
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	01/29/89 Name of Producing Formation	Top Oil/Gas Pay	6009 '
6471 GL	Blanco Mesaverde	4930' / 5626'	Tubing Depth 5922 '
4930-5491'; 562		1300 7 3020	Depth Casing Shoe
		ND CEMENTING RECORD	6049 '
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	S40/0 05/75/
12 1/4" 3 3/4"	9 5/8"	395'	SACKS CEMENT 280
6 1/4"	4 1/2"	3707' 6049'	480
V TEST DATA AND DEGUE	2 2/011	5922'	380
V. TEST DATA AND REQUI	EST FOR ALLOWABLE		
Date First New Oil Run To Tank	recovery of total volume of load oil and n Date of Test	Producing Method (Flow, pump,	e for this depth or be for full 24 hours.)
Length of Test	This is		
	Tubing Pressure	Casing Pressure	Chcke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbis.	Gas-MCF
GAS WELL			And the second second
Actual Prod. Test - MCF/D	Length of Test	Phile Condenses A D (Cr	
04/04/89 - 6642	3 hours	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (puot, back pr.) Back Pr.	Tubing Pressure (Shut-in) 630	Casing Pressure (Shut-in)	Choce Size
VI. OPERATOR CERTIFIC		688 	3/4"
Division have been complied with and	lations of the Oil Conservation	OIL CONSE	RVATION DIVISION
is true and complete to the best of my	knowledge and belief.	Date Approved	Jill Japa
Signature	hete		(CHAVEZ
Ynnted Name	Reg. Permit Coord.		
5-21-89 Date	713/968-4004 Telephone No.	Title	
	reichnone Ivo.	11	

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.