Submit 5 Copies Appropriate District Office 21STRICT 1 2.O. Box 1980, Hobbs, NM 88240

Operator

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

Well API No.

30-045-27383

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DSTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

P.O. Box 800, 1	l Lenver. 1	Co	80201	:				
Ceason(s) for Filing (Check proper box)			Other (l'lease e	xplain)				
New Well	Change in	Transporter of:					·	
Recompletion	oii 🗍	Dry Gas						
Change in Operator	Casinghead Gas	Condensate [_]		1				
change of operator give name nd address of previous operator								
I. DESCRIPTION OF WELL AND LEASE								
Lease Name		Pool Name, Including	g Formation	Kind of	Lease	Le	asc No.	
Florance O 3 Basin Fruillan				Gederal of Fee SF078201				
Location		1 - 1 - 1 - 1 - 1 - 1	<u> </u>					
Unit LetterG	: 1845	Feet From The 100	orth Line and 1	560 100	t From TheE	ast	Line	
Section 24 Township 30N Range 9W , NMI'M, SAN JUAN County								
II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS								
Name of Authorized Transporter of Oil	or Conder		Address (Give address 1	o which approved	copy of this form	is to be see	nt)	
Name of Authorized Transporter of Casinghead Gas or Diy Gas Address (Give address to which approved copy of this form is to be sent) Amoco Production Co P.O. Box 800, Denver, Co 80201								
If well produces oil or liquids,	Unit Sec.	Twp. Rgc.	Is gas actually connected			······		
ive location of tanks.			o		·			
f this production is commingled with that from any other lease or pool, give commingling order number:								
V. COMPLETION DATA			. 	<u> </u>				
Designate Type of Completion	Oil Well - (X)	Gas Well	New Well Workove	er Deepen	Plug Back Sa	ne Res'v	Diff Res'v	
Date Spudded	Date Compl, Ready to	Prod.	Total Depth		P.B.T.D.		. 	
6/25/89	10/13/89		2701'		2601			
Elevations (DF/RKB, RT, GR, etc.)	Name of Producing Formation		Top Olivoas Pay		Tubing Depth			
5797'	Fruitland	Coal	2282		2560			
Perforations Depth Casing Shoe								
	TUBING	CASING AND	CEMENTING REC	ORD	·			
HOLE SIZE	CASING & TI		DEPTH S	SAC	SACKS CEMENT			
121/4"	95/8"		a7a'		200sx C1. B			
8 1/4 "	7 "		<u> </u>		4005x 65/35 poz, tail			
· · · · · · · · · · · · · · · · · · ·					6/100 SX C/B			
4 1/2" 2 3/4"			2701; 2560	120,2× C1. B				
1. LEST DATA WITH RESCUEST FOR MELOHABLE								
OIL WELL (Test must be after re Date First New Oil Run To Tank		of load oil and must				fidl 24 how	rs.)	
Date First New Oil Ruit 10 Tank	Date of Test Producing Method (Flow, pump, gas lyf. etc.)							
Length of Test	Tubing Pressure		Casing Pressure	Choke Size	7			
	Tuomig Treasure							
Actual Prod. During Test	Oil - Bbls.		Water - Bbls.	NOV26	1990 ICF			
(1. C 1up) /	1			*	1			
GAS WELL Actual Prod. Test - MCI/D				OIL COV	i. DIV.			
	Length of Test		Bbls. Condensate/MMC	^{IF} DIST.	3 avily of Con	densate		
Testing Method (pitot, back pr.)	Tubing Pressure (She		0					
. , , ,		- 111 / -	Casing Pressure (Shut-i	11)	Clicke Size		·	
pumping	50		50		1.37	7	.,	
VI. OPERATOR CERTIFIC		OIL CONSEDVATION DIVISION						
I hereby certify that the rules and regulations of the Oil Conservation			OIL C	OIL CONSERVATION DIVISION				
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			1	:	11011			
			Date ApprovedNOV 2 6 1990					
No What								
Signaturo	By	7	$_{\star}$	-				
D. W. Whaley				X				
B. W. Whaley Staff Admin Super Printed Name 11 Jay 190 (303) 830 - 4280			Title	SUPE	RVISOR DIS	TRICT	13	
Date	Te	lephone No.						
Provident consequences and administrative and an administrative and administrative adm	AND THE PARTY OF THE PARTY.	entre Series Series	HANNO MARS VARVAGUE		HAMMER DO THE STREET	rathaus Austra	e Orași pie, de de e diaplica (55 de) a pre-	

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.