Submit 5 Cones Appropriate District Office
DISTRICT |
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-104 Revised 1-1-89

DISTRICT II P.O. Drawer DD, Arlesia, 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.	RE(	QUEST TO TF	FOF RANS	RALLOY SPORT	WA O	ABLE AND N	AUTHOR	RIZATION	1				
Union Texas Pe	troleum						MONIALC		II API No.	<del></del>			
Address 2.0. Box 2120										<del></del>			
Reason(s) for Filing (Check proper t	nous Lo	n, Tex	as	77252	-2		ther (Please exp	4-1-1	·				
New Well				Disporter of	<u>:_</u>		uici i <i>r lease ex</i> p	Haur)					
Recompletion Change in Operator	Oil			y Gas									
If change of operator give name	CARRE	ead Gas	_ (a	odes sale	<u> </u>								
II. DESCRIPTION OF WE	TT AND T		<u> </u>	>	-								
Lease Name			a Ppo	PAAME, LE	clad	line Formetics		i <b>V</b> :-	of Lease				
NYE Federal	#1 Mesave							State	Lesse No. SF078244				
Unit LetterM	:		Fee	t From The		t :	ne and						
Section 20 Ton	nathin 3	IN	Ran			<b>3</b> . /		_	eet From The		Line		
							MPM, C	JAN.	Jinn		County		
III. DESIGNATION OF TR	<u>п</u>	ER OF Condu	OIL A	ND NA	TU	RAL GAS		L:_L					
Meridian Oil In	nc.					P.O.	we address to wi Box 4289,	Farmin	d <i>copy of this</i> ; 12ton . N	form is to be se M 87499	mi)		
Name of Authorized Transporter of C Sunterra Gas Ga	thering		or D	ry Gas 🔀		Address (Gir	m eddress to w	vick approve	d come of this	Compie de la laca			
If well produces oil or liquids,	Unit	Sec.	Twp	F	ège.	is gas actual	ox 26400	, Albur	querque,	NM 8712	25		
give location of tanks.	<u> </u>	<u> </u>		1		ì			• <i>(</i>				
If this production is commingled with a IV. COMPLETION DATA	nat from any of	her lease or	r pool,	Sine comm	نهدن	ing order sum	ber:						
Designate Type of Completi	on - (X)	Oil Wel		Gas Wel	1	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Date Spudded		pi. Ready te	o Prod	<del></del>	-	Total Depth	L	<u> </u>		<u> </u>			
Elevations (DF, RKB, RT, GR, etc.)									P.B.T.D.				
					Top Oil/Gas	Pay		Tubing Depth					
Perforations	riorations						<del></del>		Depth Casing Shoe				
	]	TUBING,	CAS	ING AN	D	CEMENTE	NG RECORI						
HOLE SIZE	HOLE SIZE CASING & TUBING SIZE				$\Box$		DEPTH SET		s	SACKS CEMENT			
				_	4								
		<del></del>		<del></del>	1		· · · · · · · · · · · · · · · · · · ·						
. TEST DATA AND REQU	FOT POD A	II AW		<del></del>									
OIL WELL Test must be after Date First New Oil Run To Tank	COLFUK A Precovery of to	ALLUW A	ABLE ABLE	ر المعالية ا									
Date First New Oil Run To Tank	Date of Tes	ı.	<del>-,</del>	<u> </u>	1	Producing Me	thad (Flow, pur	vable for this . pas lift, e	depth or be fo	r full 24 hours	.)		
ength of Tex	Tubina Des			<del></del>									
	Tubing Pres	enti-6				Casing Pressu	18		Choke Size				
ctual Prod. During Test	Oil - Bbls.				11	Water - Bbis.		<del> </del>	Gas- MCF				
GAS WELL													
ctual Prod. Test - MCF/D	Length of T	est			T	Bbis. Condens	MMCF		Consists of Co				
ing Method (puot, back pr.) Tubing Pressure (Shut-in)				:			;	Gravity of Condensus					
mang meason (puos, ogck pr.)	Tubing Pressure (Shut-in)				C	acing Pressur	t (Shut-in)		Choke Size				
I. OPERATOR CERTIFIC	CATE OF	COMPI	LIAN	NCE	٦		<del></del>						
I hereby certify that the rules and regr Division have been complied with and	lations of the C	il Conserve	etion			0	IL CONS	SERVA	TION D	IVISION	1		
is true and complete to the best of my	gnomjedes sug	i belief.	I EDOVE	3		D-:	<b>A</b> =		Augo	0 1000			
The River						Date ApprovedAUG 2 8 1989							
Signature Comments						By Bund). Change					•		
Annette C. Bisby Printed Name	Env/		<u>Sec</u>	crtry		•				DISTRIC	T # 3		
8-7-89	(7	13) 96	8-40			Title_					- 17 0		
Date		Telepi	bone N	io.									

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-174 must be filed for each pool in multiply completed wells.

Substat 5 Cooles
Appropriate District Office
DISTRICT 1
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

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

## OIL CONSERVATION DIVISION

P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088

I.		REQ					D AUTHORI NATURAL G					
Operator						AIND I	VATURAL G		API No.	<del></del>	<del></del>	
	Texas Petro	leum C	ornora	tion	ļ:							
Address 2.0. B	lox 2120 4	oustor	. Teva	.e. 7	7252-2	2120						
Reason(s) for Filing (			.,	,	7 2 3 2		Other (Please expi	aun)	····	<del>~</del>		
New Well	=			_	porter of:	<del>.</del>	·	•				
Recompletion Change in Operator	=	Oil Coriombo	<u></u>			]						
If change of operator	give same	Cango	ad Gas	Cond	The last of the la	3				<del></del>		
and address of previou	is operator				<del></del>			<del></del>				
II. DESCRIPTION LABOR NAME	ON OF WELL	AND LE		05	∌AS IN							
Nye	Federal		Well No.	44/	akota)	uding Format	COS.		of Lease Federal or Fee	SF0782		
Location					<del>uno ou</del>			····		310702	<del>***</del>	
Unit Letter	<u> M</u>	_ :		_ Feet !	From The .		Line and	F	et From The		Line	
	_) O Townshir	2	/n /	_	17	1-/		500	<del></del>			
Section	20 Township	<u> </u>		Rang	e / <i>o</i> ~		, NMPM,	JAN (	JUAN		County	
III. DESIGNAT	<u>ION OF TRAN</u>	SPORTI	ER OF C	IL A	ND NAT							
Name of Authorized	Transporter of Oil an Oil Inc.	$\square$	or Conde	a sule			Give address to w				· · · · · · · · · · · · · · · · ·	
Name of Authorized				or Dr	y Gas X		Box 4289, Give address to wi				<del></del>	
Sunter	ra Gas Gath	ering	Co.		, <del>(</del>	P.O.	Box 26400	, Albur	querque.	n <i>is to be sent):</i> NM 87125		
If well produces oil or zive location of tanks.	r liquide,	Unit	Sec.	Twp.	Re		mally connected?	When				
f this production is co	maineled with that (	<u> </u>	har large or						<del></del>			
V. COMPLETI		rom my oc	net mene Of	pout, g	AS COURTE	signal order a	under:	<del> </del>			<del></del>	
Designate Type	of Completion	- (X)	Oil Wel	1	Gas Well	New W	ell Workover	Deepee	Plug Back S	ame Res'v D	iff Res'v	
Data Spudded Date Compi. 8			pi. Ready t	o Prod.	<del>+</del>	Total Dep	Total Depth			P.B.T.D.		
Clamber /DE BYD	PT CP ma	Name of I			<del></del>	Top Oil/C	as Pau	<del></del>				
Elevanous (DF, RKB, RT, GR, etc.) Name of Producing Formation					10p Out	as ray		Tubing Depth	Tubing Depth			
Perforations					<del>.</del>			Depth Casing Shoe				
		<del></del>	TIBBIC	CAS	A10 AND	D CENTEN	TNIC DECOR					
HOLE						D CEMEN	TING RECOR DEPTH SET	D	CA.	SACKS CEMENT		
	77002 042		CASING & TUBING SI			DEFIN SET			SHOWS CEMENT			
		:										
		· i	<del></del>								!	
V. TEST DATA	AND REQUES	T FOR	ALLOW	ABLE	E		·· <del>·</del> -··			<del></del>		
OIL WELL	Test must be after re			of load	oil and me					full 24 hours.)		
Date First New Oil Ru	a To Tank	Date of To				Producing	Method (Flow, pu	mp, gas lift, e	ic.)			
Length of Test		Tubing Pr	searie		+	Casing Pr	eacht.	<del></del>	Choke Size			
Actual Prod. During T	esi	Oil - Bbls.			Water - B	pir		Gas- MCF				
GAS WELL		•				· -		<del></del>	ı			
Actual Prod. Test - Mi	CF/D	Length of	Test		<del>-,</del>	Bbls. Con	densate/MMCF	<del></del>	Gravity of Cos	desente		
esting Method (pitot,	back pr.)	Tubing Pressure (Shut-in)				Casing Pr	essure (Shut-in)	•	Choke Size			
		!			<del> </del>	<del>-</del>		<del></del>	:		·	
VI. OPERATO					NCE		OIL CON	ISFRV		IVISION		
Division have been	t the rules and regula complied with and t	hat the info	rmetica giv		r <b>i</b>		٠, <u>-</u>	···································				
is true and complet	e to the best of my in	nowledge a	nd belief.			Da	ite Approve	d	AUG 24	R_1000		
(San	Je P.	Kil.	_					1		∕ <del>⊣ooo-</del> ∕f		
Signature		SICE,	11	<del></del>	+	Ву	,	3.	1) G	hen/		
Annette Printed Name 8-7-89	C. Bisby	Env	Res (713) 9	Tille	crtry	Tit	le	<b>SU</b> PE	RVISION	ISTRICT	# 3	
Date		` <b>`</b>		ephone								

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