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 Brizos Rd., Aziec, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

17.00.0000	T(<u>O TRANSPO</u>	RTO	IL AND N	ATURAL C					
A.P.A. Development, Inc.						I I	II API No. 0451115300S1			
Address	ic, inc.									
P.O. Box 215, Cor	tez, CO 8132	1	····							
Reason(s) for Filing (Check proper New Well	•	hange in Transporte	مد مان	[_] 0	ther (Please exp	lain)				
Recompletion [_]	Oil	Dry Gas								
Change in Operator []	Casinghead C	Jas 🔲 Condensa	ite [
If change of operator give name and address of previous operator					~~ · · · · · · · · · · · · · · · · · ·					
II. DESCRIPTION OF WI	ELL AND LEAS	F								
Lease Name					luding Formation Kin			d of Lease No.		
Navajo "P"	5 Many Ro			ks Gallup S			te, Federal or Fee 14-20-600-35			
Location	4000		_							
Unit LetterN	. 1980	Feet From	The _N	<u>Vest</u> Lir	ne and660	F	ect From The _	South	Line	
Section 35 To	wnship 32N	Range	17W	, N	мрм,	San Ju	an		County	
III. DESIGNATION OF TI	RANSPORTER (OF OIL AND	NATU	RAL GAS					•	
Name of Authorized Transporter of (Oil _[X] or	Condensate [-		Address (Gi	ve address to wi	hich approve	d copy of this for	m is lo be s	eni)	
Gary-Williams Energy Corporation Name of Authorized Transporter of Casinghead Gas or Dry Gas				· · · · · · · · · · · · · · · · · · ·			300, Denver, CO 80202-565 d copy of this form is to be sent)			
			• ——	vomess (Ou	re aaaress (o wi	uch approved	t copy of this for	m is to be s	eni)	
If well produces oil or liquids, give location of tanks.	Unit Sec		Rge. 17W	is gas actuali	y connected?	Wher	?			
If this production is commingled with IV. COMPLETION DATA	that from any other le	ase or pool, give co	ommingl	ing order numi	ber:					
The second section of the second section of the second section	0	il Well Gas	Well	New Well	Workover	Deepen	Plug Back S	ame Ros'v	Diff Res'v	
Designate Type of Complet Date Spudded				1				#1110 I\Q4 Y	John Kesy	
name plumped	Date Compl. Re	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)	Name of Produc	laine of Producing Formation			Top Oil/Gas Pay			Tubing Depth		
erforations										
							Depth Casing	Shoe		
	BING, CASING AND		DEPTH SET			SACKS CEMENT				
HOLE SIZE	CASING & TUBING SIZE									
										
				· · · · · · · · · · · · · · · · · · ·	····		****			
TERCE IN THE TANK DESCRIPTION	idagram abidis Tala a	71117111 ar		·						
TEST DATA AND REQU OIL WELL Gest must be after	JEST FOR ALL	OWABLE		• .			The street was a course of the street of the	· • • • • • • • • • • • • • • • • • • •		
Date First New Oil Run To Tank	Date of Test	nume nj toda oti an	ia mitsi b	Producing Meu	xceed top allow hod (Flow, pum	able for this	depth or be for	full 24 hours	<u>r.).</u>	
and the of The						y, gas iyi, si				
ength of Test	Tubing Pressure	Tubing Pressure		Casing Pressure			Choke	EC1 4	ଂସ୍କ୍ର	
actual Prod. During Test	Oil - Bbls.	Oil - Bbls.		Water - Bbls.						
The field state state of the field and the state of the s								GIL CO		
IAS WELL Clust Prod. Test - MCF/D	······································						7 t Marie (1945), marie (1940), 1940 (1940)	Dit:		
TOUT FIND. TENT - MICHAEL	Length of Test			bls. Condensa	IE/MMCF		Gravity of Cond	ensale		
sting Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut in)			Clicke Size			
I. OPERATOR CERTIFI	CATE OF CO	MDI TANCE					-			
I hereby certify that the rules and reg	culations of the Oil Co.	nearyation		O	L CONS	SERVA	TION DI	JISION	NI.	
Division have been complied with an is true and complete to the best of m	od that the information	given shove							1	
	A renowledge and pelic	:I.		Date A	pproved	DE	C 1 4 199	3		
Hatrix 7/0	colar.				•					
Signature Patrick Woosley		Operator	-	Ву		<u> (بر د 3</u>	Ch.		**************************************	
Printed Name		Title	-	age I	S	UPERVI	SOR DISTR	ICT #2		
Date 12/6/93		65-2458	_	Title				- 10	P+	
	•	l'elephone No.	- 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.