Submit 5 Copies Appropriate District Office DISTRICT I P.O. Box 1980, Hobbs, NM 88240

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

bulle of frew Michies 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 Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.	TO	TRANSP	ORT O	IL AND N	ATURAL					
Operator Harrison Pet	TO TRANSPORT OIL AND NATURAL GAS well API No. 37453 30 - 045						S- 21	19113		
Address				······································		1_=	0-07	<u> </u>	703	
P. O. Box 35 Reason(s) for Filing (Check proper b		k.,		/:/	/		· · · · · · · · · · · · · · · · · · ·			
New Well	•	inge in Transpo	orter of:	<u>x</u> 0	her (Please e	xplain)				
Recompletion	Oil	Dry G	(Change	e of Op	erator			
Change in Operator	Casinghead Ga	s Conde	nsate 🗌	·	····					
If change of operator give name and address of previous operator	A.P.A. Dev	elopmen	it, In	c., Bo	x 215,	Cortez	c, Co.,	81321		
II. DESCRIPTION OF WE	LL AND LEASE									
Lease Name			ame, Includ	ling Formation		Kin	d of Lease N	AVAJO	Lease No.	
Navajo /	14160	14 Ma	iny Ro	cks Ga	llup <i>4</i> 4	1	e, Federal or F		20-603-	
Location	. 360			South		2310		East	-	
Unit Letter	!	Feet Fr	om The	South	ne and		Feet From The	,	Line	
Section 27 Tow	nship 32N	Range	17W		<u>мрм,</u>	San Jua	ın		County	
III. DESIGNATION OF TR	ANSPODTED O	E OH AND	TO READER	DAT CAC					•	
Name of Authorized Transporter of O	or C	ondensate			ve address to	which approv	ed copy of this	form is to be s	seni)	
Gary Williams, En				89 Rd	., Blmi	fld., N	IM., 87	413		
Name of Authorized Transporter of C None	asinghead Gas	or Dry	Gas [Address (Gi	ve address to	which approv	ed copy of this	form is to be s	reni)	
If well produces oil or liquids,	Unit Sec.	Twp.	Roe	Is gas actual	v connected?	Whe	?			
give location of tanks.	0 27	32N	17W	In Bas actual	y connected?	į wne	in r			
I this production is commingled with	that from any other lea	se or pool, give	e comming	ling order num	ber:		· · · · · · · · · · · · · · · · · · ·			
IV. COMPLETION DATA										
Designate Type of Completi	on - (X) [Oil	Well G	ias Well	New Well	Workover	Deepen	Plug Dack	Same Res'v	Diff Res'v	
Date Spudded	Date Compl. Rea	Date Compl. Ready to Prod.			<u> </u>		P.B.T.D.			
Classica APP DED OF OR							1.0.1.0.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
Perforations .					· · · · · · · · · · · · · · · · · · ·		Depth Casi	ng Shoe		
								ig alloc		
HOLE SIZE	TUBII	TUBING, CASING AND			CEMENTING RECORD			MEL	1	
HOLE SIZE	CASING	& TUBING SI	IZE	DEPTH SET U			G E SACKS COMENT			
					100			AN 3 1 1994		
							111111111111111111111111111111111111111	13.4		
. TEST DATA AND REQU	FST FOR ALL O	WADIE				011	CON	DIV.		
	er recovery of total vol		Land must :	he equal to or	exceed ton all	laurahla Con dh	DIST.	3		
Date First New Oil Run To Tank	Date of Test			Producing Me	thod (Flow, p	ump, gas lyi,	is depin or be j	or Juli 24 how	rs.)	
angth of Test	_			~~~			•			
Angul of Text	Tubing Pressure	Tubing Pressure		Casing Pressure			Choke Size			
ctual Prod. During Test	Oil - Bbls.	Oil - Bbls.			Water - Bbis.			Gas- MCF		
GAS WELL							-t		·	
ctual Prod. Test - MCF/D	Length of Test			Bbls. Condens	ale/MMCF		Gravity of C	ondensate		
sting Method (pitot, back pr.)	Tubing Pressure (Tubing Pressure (Shut-in)			Casing Pressure (Shut in)					
	g residue (c							Choke Size		
I. OPERATOR CERTIFI	CATE OF COM	APLIANC	'F				<u> </u>		·	
I hereby certify that the rules and reg	ulations of the Oil Cor	servation		С	IL CON	ISERV	ATION [DIVISIO	Ν	
Division have been complied with an is true and complete to the best of m	of that the information with the knowledge and belief	given above							•	
	, Bo and the the	7	I	Date:	Approve-	d	JAN 3 11	334		
Jev & Ha	rean 1	J.				Bis	\	/		
Signature en 5.	fan pisa	m, S	, II	Ву						
Printed Name / - 26 - 9	(/ >	Title		Title		SUPER	ASOR DIS	TRICT #	3	
Date 7	7 36	f-5/	12	Title_						
		- reprients (NO.	1 !	1						

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.