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

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

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

| 1. | | TOTAL | NINOL | OHI OII | - AND NA | HUMAL | CAL | | | | | |
|--|--|---------------------------------------|----------|----------------|----------------|-----------------------------------|-----------------|--------------|---|-----------------|------------|--|
| Operator | | | | | | | | Well A | API No. | | | |
| Hallwood Petroleum, Inc. | | | | | | 30-045-23197 | | | | | | |
| Address | | | | | | | | | | | | |
| P.O. Box 378111, Denv | er, CO | 80237 | 7 | | | | | | | | | |
| Reason(s) for Filing (Check proper box) | | | | | XX Ou | ret (Please exp | olain) | | | | | |
| New Well | Change in Transporter of: | | | | | Company name changed from Quinoco | | | | | | |
| Recompletion | Oil | | Dry G | i28 | P | etroleu | n, Ir | 1C. 6 | effectiv | e 6/1/90 |) | |
| Change in Operator | Casinghea | ad Gas | Conde | nute | | | | | | | | |
| If change of operator give name | inoco I | 20trole | | Inc | P.O. Box | 270111 | Dor | | CO 90 | 237 | | |
| and address of previous operatorQU II. DESCRIPTION OF WELL | | | zuiii, | 1110., | r.u. bux | 3/0111 | , Dei | iver, | , 00 00 | 231 | | |
| Lease Name | AND LE | | I Pool N | Jame Includ | na Formatica | | | Vind a | flanca | | ase No. | |
| Montoya 27 | | | | | | | | | Kind of Lease No. State, Federal of Fee | | | |
| Location | · · · · · · · · · · · · · · · · · · · | <u> </u> | 1 | DUSTII | Dakota | | | | | | | |
| n | 70 | 90 | | | c | 7 | 00 | | | r - | | |
| Unit Letter P | _ : | 50 | . Feet F | rom The | S Lin | bas oc | 90 | Fe | et From The | E | Line | |
| Section 27 Township | _ 3: | 2N | | 13W | | | San . | luan | | | ~ | |
| Section 21 Townshi | p 34 | | Range | 134 | , N | МРМ, | Sail C | Juan | | | County | |
| III. DESIGNATION OF TRAN | SPORTE | | | ND NATU | | | | | | | | |
| Name of Authorized Transporter of Oil | | or Conde | 152le | X | 1 | | | • | | orm is to be se | | |
| Giant Refining Co. | | | | | | | | | | Z 85267 | | |
| Name of Authorized Transporter of Casing | Address (Give address to which approved copy of this form is to be sent) | | | | | | | | | | | |
| <u>El Paso Natural Gas Co</u> | | | | | ¹ P.O. E | 30x 1492 | , E1 | Pasc | o, IX 7 | 9978 | | |
| If well produces oil or liquids, | Unit | Sec. | Twp. | Rge. | Is gas actual | ly connected? | | When | ? | | | |
| give location of tanks. | l P | 27 | 321 | N 13W | Ye | 28 | I | | | | | |
| If this production is commingled with that i | from any ou | ner lease or | pool, gi | ive comming | ling order nun | iber: | | | | | | |
| IV. COMPLETION DATA | | | | | _ | | | | | | | |
| | | Oil Well | | Gas Well | New Well | Workover | De | epen | Plug Back | Same Res'v | Diff Res'v | |
| Designate Type of Completion | - (X) | i | i | | i | i | i | • | ĺ | İ | i | |
| Date Spudded | Date Com | pl. Ready to | Prod. | · | Total Depth | <u>.</u> | | | P.B.T.D. | I | 1 | |
| | | • | | | | | | | | | | |
| Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation | | | | | | Pay | | | Tubing Dep | th | | |
| | | | | | | | | | | | | |
| Perforations | | | | | | | | | Depth Casin | g Shoe | | |
| | | | | | | | | | | | | |
| | ~ | TIRING | CASI | ING AND | CEMENT | NG RECO | RD | | | | | |
| HOLE SIZE | CEMENTING RECORD DEPTH SET | | | | 1 | SACKS CEMENT | | | | | | |
| HOLE SIZE | SING & TI | JBING | SIZE | DEPIRSE | | | | SACKS CEMENT | | | | |
| The state of the s | - | | | · | | | | | | | | |
| | 1 | | | · | - | | | | <u> </u> | | | |
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| C TECT DATA AND DECLIES | TEAR | · · · · · · · · · · · · · · · · · · · | TOLE | | ! | | | | | | | |
| V. TEST DATA AND REQUES | | | | | | | | | | | , | |
| OIL WELL (Test must be after re | | | of load | oil and mus | | | | | | jor juli 24 hou | 75.) | |
| Date First New Oil Run To Tank | Date of Te | S. | | | Producing N | fethod (Flow, | <i>рш</i> пф, g | as lyt, e | eic.) | | | |
| | | | | | - P | | | | | Challe Sine | | |
| Length of Test | essure | | 1 | Lading Heasure | | | Choke Size | | | | | |
| | | | | | <u> </u> | | | | 125 | | | |
| Actual Prod. During Test | Oil - Bbls. | | | 6 | Water - Bbl | <u>.</u> 0 199 0 | ' | #÷' | Gas- MCF | | | |
| | | _ | | | JUL | y 1000 | | | | | | |
| GAS WELL | | | | | Oli C | ON D | IV. | | | | | |
| Actual Prod. Test - MCF/D | Length of | Test | | | · Bbls. Conde | gsate/MMCF | . 🗸 3 | | Gravity of C | Condensate | | |
| | | | | | D | 151. J | | | | | | |
| Testing Method (pitot, back pr.) | Tubing Pr | essure (Shu | t-in) | | Casing Pres | sure (Shut-in) | | | Choke Size | | | |
| thank many h. A | | (| , | - | | , | | | | | | |
| Y17 AND | <u> </u> | | | | -ir | | | | | | | |
| VL OPERATOR CERTIFIC | ATE OF | COM | PLIA. | NCE | | | NICE | עם: | ATION | DIVISIO | M | |
| I hereby certify that the rules and regula | | | | | | OIL CO | INSE | _ [] V | ATION | DIVISIC |) I V | |
| Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. | | | | | | | | | AUG 1 0 | 199Ñ | | |
| is true and complete to the best of my i | inowiedge a | ma dellei. | | | Dat | e Approv | ed _ | | MUU I V | | | |
| 4/ | 2 | . , | | | | | | | | A . | | |
| <u> </u> | CLA | rac | 200 | ر_ | By_ | | | | () A | ham | | |
| Signature Holly S. Richardson Sr. Ops. Eng. Tech. | | | | | | | | | | | | |
| Printed Name | . 0P | <u> 119</u> | Title | J | 1 | | S | UPER | RVISOR | ISTRICT | f3 | |
| 6/26/90 | (303 |) 850- | | | Title | 9 | | | | | | |
| Date Date | 1,505 | | ephone | | | | | | | | | |
| | | | - p.,, | | 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 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-104 must be filed for each pool in multiply completed wells.