		_							•		
— Submit 5 Copies Appropriate District Office DISTRICT I	State of New Mexico Energy, Minerals and Natural Resources Depa						ent	clst Dp	Revised 1 See Instr	Form C-104 Revised 1-1-89 See Instructions	
DISTRICT II P.O. Drawer DD, Antesia, NM \$8210	OIL CONSERVATION P.O. Box 2088						N	RECEIVED			
DISTRICT III		San	ita Fe	, New Me	xico 8750	4-2088					
1000 Rio Brazos Rd., Aztec, NM 87410						UTHORIZ	AS		NOV	27 '89	
Operator							Well /	Pi No.		C. D.	
ENERGY DEVELOPMENT COP	PORATI	ON					30-	005-6100		SIA, OFFICE	
Address 1000 Louisiana, Suite	2900.	Houston	п. Т	exas 7	7002						
Reason(s) for Filing (Check proper box)						r (Please expla	zir)				
New Well		Change in	-		Sectio	n III no	t appli	cable -	Waterflo	bod	
	Oil Casinghea	_	Dry G Conde	_		ion well					
Change in Operator X					- 0 4+	1 9 0 0	Usuator	Toros	77002		
and address of previous operator <u>FED</u>			1, 5	00 Dalla	as, Sult	<u>e 1800.</u>	HOUSLON	, Texas	11002		
II. DESCRIPTION OF WELL)F WELL AND LEASE					Kind of L			Lease Lease No.		
	Well No. Pool Name, Includin				- San Andres Assoc				ENTRY IN Fee		
TL SAU		68	1	<u>H Bakeb</u>					A		
Unit Letter E	. 1650)	Foct F	Tom The No	rth_Li	and330	F	et From The _	West	Line	
										County	
Section 6 Townshi	<u>p 95</u>		Range	<u>29E</u>	<u>, N</u>	MPM, Cha	aves			Cottany	
III. DESIGNATION OF TRAN	SPORTE	ER OF O	IL AP	ND NATU	RAL GAS	-					
Name of Authorized Transporter of Oil		or Conden			Address (Giv	e address to w	hich approved	l copy of this fo	rm is to be se	nt)	
N/A			D		N/A	n address to w	hich approve	l copy of this fo	rm is to be se	nt)	
Name of Authorized Transporter of Casin, N/A	gnead Gas		or Dr	y Gez 🔛	N/A						
If well produces oil or liquids,					Is gas actually connected? When N/A			n ? N/A			
give location of tanks.											
If this production is commingled with that	from any of	her lease or	pool, g	ive comming	ing order sum	ber:	<u>.</u>			• .	
IV. COMPLETION DATA		Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	- (X)	02			i	<u> </u>	<u>i</u>	i		<u> </u>	
Date Spudded	Date Corr	npl. Ready to	Prod.		Total Depth			P.B.T.D .		- -	
levations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Dep	Tubing Depth		
EVELORE (DF, RKB, RI, OK, SEC.)					•						
Perforations	<u></u>							Depth Casing Shoe			
		TIDDIC	CAS		CEMENT	NG RECO	20	<u> </u>			
HOLE SIZE	CASING & TUBING SIZE				CEMENTING RECORD				SACKS CEMENT		
									TID	-3	
								l	12-8-89		
					<u> </u>	· · · · · · · · · · · · · · · · · · ·			- and off		
V. TEST DATA AND REQUE	ST FOR	ALLOW	ABL	E	<u></u>						
OIL WELL (Test must be after	recovery of	total volume	of loa	d oil and mus	t be equal to a	r exceed top a	llowable for t	his depth or be	for full 24 ho	ers .)	
Date First New Oil Run To Tank	Date of T				Producing N	Aethod (Flow,	pump, gas líft	, e tc.)			
					Casing Pres			Choke Size	Choke Size		
Length of Test	Oil - Bbls.										
Actual Prod. During Test					Water - Bbis.			Gas- MCF			
	<u> </u>				<u> </u>						
GAS WELL									Condensate		
Actual Prod. Test - MCF/D	Length of Test				BDIA. Cond	Bbis. Condensate/MMCF			Gravity of Condensate		
Testing Method (pilot, back pr.)	Tubing	Pressure (Shi	ui-m)		Casing Pres	sure (Shut-in)		Choke Size			
to count the second fraction for the state											
VL OPERATOR CERTIFIC	CATE C	F COM	PLI/	ANCE					ופועום		
I hereby certify that the rules and regulations of the Oil Conservation						OIL CONSERVATION DIVISION Date Approved					
Division have been complied with an is true and complete to the best of my	d that the in	formation gi	ivez ab	ove				DED -	8 1988		
	\square					e Approv		<u></u>			
Michael M. Dauer											
Signature						By			NMAL SIGNED BY		
Michael M. Bauer	Agent Tile				Titl	TitleCURENVISOR, DISTRICT I			Л II		
11-06-89		(713)								. and a	
Date		T	elephot	x rw.							

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.

All sections of this form must be filled out for allowable on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
Separate Form C-104 must be filed for each pool in multiply completed wells.