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

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

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

AUG 3 0 **1991**

O. C. D.
ARTESIA OFFICE

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410
--

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator							Weil API No.			
ddress							005–62764			
P.O. Box 244	43, Roswell,	NM 8820)2-244	· 3						
eason(s) for Filing (Check proper box) ew Well ecompletion hange in Operator		in Transporter Dry Gas Condensate		Othe	r (Please expla	in)				
change of operator give name d address of previous operator										
. DESCRIPTION OF WELL	AND LEASE									
Frank "P" State Well No. Pool Name, Include 7 Diablo-San				I .			Kind of Lease No. State, ROWN XXXIVEX LG-5246			
Ocation Unit LetterP	:990			outh Line			et From The	East	Line	
Section 21 Townshi	ip 10-S	Range	27E	, NI	ирм, Chav	res 			County	
II. DESIGNATION OF TRAN Name of Authorized Transporter of Oil Pueblo Petroleum Name of Authorized Transporter of Casin	INC. or Cor	OIL AND		Address (Giv. P.O. Bo	e address to wh x 8249, F	Roswell,	NM 8820	02		
· · · · · · · · · · · · · · · · · · ·		Of Diy G2:	•	Modress (GW	e address to wh	исн арргочеа	copy of this for	m is to be se	nt)	
f well produces oil or liquids, ive location of tanks.	Unit Sec.	Twp. 10-S	27E	Is gas actually connected? When			7			
this production is commingled with that V. COMPLETION DATA	from any other lease	or pool, give c	ommingli	ng order numl	oer:					
Designate Type of Completion	- (X)	Vell Gas	Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
ate Spudded	Date Compl. Read	y to Prod.		Total Depth	·	l	P.B.T.D.	· · · · · · · · · · · · · · · · · · ·	<u></u>	
levations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil Gas Pay			Tubing Depth			
Perforations				Depth Casing Shoe						
	TURIN	IG CASING	AND	CEMENTI	NG RECOR	D			•	
TUBING, CASING AND HOLE SIZE CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT				
. TEST DATA AND REQUE			•				<u> </u>			
OIL WELL (Test must be after) Date First New Oil Run To Tank	Date of Test	une of load oil i	and musi		exceed top allo			r full 24 hou	rs.)	
	Date of Tex			r roducing ivi	eurou (1·10w, pu	omp, gas iyi, d	::::::			
ength of Test	Tubing Pressure			Casing Pressure			Choke Size			
Actual Prod. During Test	Oil - Bbls.			Water - Bbls.			Gas- MCF			
GAS WELL							<u> </u>	· - · · · - · · · · · · · · · · · · · ·		
Actual Prod. Test - MCF/D	Length of Test			Bbls. Condensate/MMCF			Gravity of Condensate			
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size			
VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			OIL CONSERVATION DIVISION							
Ray Al Callina				Date	Approve	d	SEP -	<u>0 1991</u>		
Signature ROY D. COLLINS	Pres. Collins O/G			By_	ORIGI	MAL SIG	VED BY		·	
Printed Name 8-28-91	623-2040	Title		H		WILLYS	5	γ	····	
Date		Telephone No.								

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 rool in multiply completed walls