iubmit 5 Copies \ppropriate District Office 21STRICTI 1.O. Box 1980, Hobbs, NM 8824**¢É**CE!VED State of New Mexico

Energy, Minerals and Natural Resources Department

Form C-104 Revised C-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION NSTRICT II O. Diawer DD, Aneda, NM 88810 & 4 1992 P.O. Box 2088

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(XXX) Rio Brazos Rd., Aziec, NM 87200 C. D.
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(XXX) Rio Brazos Rd., Aziec, NM 87200 C. D.
(XXX) Rio Brazos Rd., Aziec, NM 87200 C. D. Santa Fe, New Mexico 87504-2088 TO TRANSPORT OIL AND NATURAL GAS Decator Well API No. \rldress VM. 049 3696 'cason(s) for Fili lew Well ²rcompletion Dry Gan hange in Operator Casinghead Gas Condensate change of operator give name address of previous operator ZIA GITERPRISES Po Box 1306 Arteria 88216 DESCRIPTION OF WELL AND LEASE Well No. | Pool Name, Including Formation Kind of Leane State, Federal on Fee Kind of I Lease No. 'LL' Oyeon A550C M 0493690 Unit Letter Feet From The X Township 14-5 Range 29-E , NMPM. II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) or Condensate of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) GAS 26.26 Cale Ave., Suite 300 Dallas TX
Is pas actually connected? | When 7 Is gas actually connected? location of tanks. 465 this production is commingled with that from any other lease or pool, give commingling order number: V. COMPLETION DATA Gas Well New Well Workover Oil Well Deepen | Flug Back | Same Res'v Designate Type of Completion - (X) Hiff Res'v late Spudded Date Compl. Ready to Prod Total Denth levations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay **Tubing Depth** ctionations Depth Casing Shoe TUBING, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE SACKS CEMENT TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hows.) rate First New Oil Run To Tank Date of Test Producing Method (Flow, pump, gas lift, etc.) ength of Test Tubing Pressure Casing Pressure Choke Size ctual Prod. During Test Oil - Bble Water - Bbls **FAS WELL** ctual Frod Test - MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate sting Method (pitot, back pr.) Tubing Pressure (Shut-in) Casing Pressure (Shut-in) Choke Size I. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation OIL CONSERVATION DIVISION Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief. JUL 2 9 1992 Date Approved ... By . ORIGINAL SIGNED BY FRED . TONES MIKE WILLIAMS Title SUPERVISOR, DISTRICT IS Title

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Date

- 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.

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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