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Appropriate District Office
DISTRICT 1

חוקדפוכד חו

State of New Mexico Energy, Minerals and Natural Resources Department

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

P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Artesia, NM 88210

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

1000 Rio Brazos Rd., Aziec, NM 874	10 BEO	UECT E			5	. 2000					
<b>I.</b>	HEQ	TOTE		LOWA	BLE AND	AUTHOR	IZATION				
Operator		10 IN/	MINSPL	HIO	L AND NA	TURALG		·			
Snyder Oil Corporati				I API No.							
Address		<del></del>	30	-025-220	149						
801 Cherry Street, S	Suite 25(	00			Ft.	Worth, T	X 7610	ጎን			
leason(s) for Filing (Check proper box	;)					nes (Please expl		J.Z.			
lew Well		Change in	Transport	er of:	_	,	,				
ecompletion \[ \bullet \text{\text{V}} \]	Oil		Dry Gas								
hange in Operator	Casinghe	ad Gas	Condens	ate 🔲	Effect	ive 7/1/	90				
change of operator give name d address of previous operator Sny	yder Ope	rating	Compar	ny, 80	Ol Cherry	Street,	Suite	2500, Ft	• Worth	, TX 76	
DESCRIPTION OF WEL	LANDIE	ACE			<del></del>	-					
ease Name	Well No.   Pool Name, In			ne leelus	lian Familia			( - A - C )			
State "K"		1	1		ley Permo	Donn		of Lease Federal or Fe		ease No.	
cation		<del></del>	THOTE	n Dag.	rey rernic	rein			<b>€</b> K-17	63	
Unit Letter _K	. 19	80	East Email	- T. S	outh Lin	. 198	0		West		
			_ rea rroc	n the	Lin	e and	F	eet From The	west	Line	
Section 21 Towns	ship 11S		Range	33E	N.	МРМ,		ĭ	ea		
						VII IVI,	<del></del>	L	ea	County	
DESIGNATION OF TRA		R OF O	IL AND	NATU							
• • • • • • • • • • • • • • • • • • •	1 4 4	Or Condensate			Address (Giv	e address to wi	tich approved	d copy of this form is to be sent)			
noco Pipeline Company me of Authorized Transporter of Cas		chard Case 5			3411 K	noxville	, Lubbo	ck, TX 79413			
arren Petroleum Corp.	ingnead Gas	KX.	or Dry G	B4	Address (Giv	e address to wi	uch approved	copy of this f	orm is to be s	eni)	
well produces oil or liquids,	Unit	1 5	1700		P. O.	Box 67.	<u>Monumen</u>	t. NM	88265		
c location of tanks.	I K	Sec. 21	Twp.     115	<b>Rge</b> . 33E	Is gas actually Yes	y connected?	When	?			
uis production is commingled with the							5/	67			
COMPLETION DATA	<u></u>	AT ICES OF	poor, give	commung	ling order numb	oer:		···			
Decision Town C.C.		Oil Well	Car	s Well	New Well	Workover	Deepen	Dive Deal	la p		
Designate Type of Completio			i			i Girotei	l Dæpen I	i Flug Back	Same Res'v	Diff Res'v	
le Spudded	Date Com	pl. Ready to	Prod.		Total Depth		<i>ـــــــــ</i> ـــــــــــــــــــــــــــ	P.B.T.D.	L		
vations (DF, RKB, RT, GR, etc.)	No.										
evations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil Gas Pay			Tubing Depth			
forations											
								Depth Casin	g Shoe		
	- <del></del> 7	TIRING	CASINIC	ANID	CTA (TA ITI)	ic proce					
HOLE SIZE	CA.	SING & TH	CASING SIZ	AND	CEMENTIN		D				
		CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT			
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								<del> </del>			
			<del></del> -				<del></del>			<del></del>	
TEST DATA AND REQUE					1		<del></del>		<del></del>		
WELL (Test must be after	recovery of so	ital volume o	of load oil	and must	be equal to or	exceed top allo	wable for this	depth or he f	or full 24 hour	re )	
e First New Oil Run To Tank	Date of Tes	st .			Producing Me	thod (Flow, pu	rup, gas lift, e	ic.)	O. J. 14 702		
4.47								,			
gth of Test	Tubing Pre	Tubing Pressure				Casing Pressure			Choke Size		
ual Prod. During Test											
my stort briting 188	Oil - Bbls.				Water - Bbis.			Gas- MCF			
		<del></del>			!						
AS WELL							_				
pual Prod. Test - MCF/D	Length of 7	Length of Test			Bbls. Condensate MMCF			Gravity of Condensate			
- Market and a second								<u> </u>			
ing Method (pitot, back pr.) Tubing Pressure (Shut-in)					Casing Pressure (Shul-in)			Choke Size			
0.000 in 1000		<del></del>									
OPERATOR CERTIFIC	CATE OF	COMP	LIANC	E							
hereby certify that the rules and regu	ulations of the (	Oil Conserv	ation		C	IL CON	SERVA	I NOITA	DIVISIO	N	
Division have been complied with and a true and complete to the best of my	that the infon	mation give	n above								
was suppose to the best of the	Townedge 3D	a belief.			Date	Approved	4	٠,	Ng. 6	ij	
1/211.11h	1./					pp.0400	-	<u> </u>		<del></del> -	
Signature )	<del>'</del>				Ву	ξ <b>ι</b> :	. is 10 .			TON	
etty Usry	Produ	ction A	nalvot		By				3-11		
rinted Name			maryst Title	<del></del>	ll <b>_</b>						

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

7/9/90

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Title

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Telephone No.

(817) 338-4043

3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes