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, Artesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

l		IO IHA	<u> 1001</u>	OHI OIL	AND NA	TURAL GA		DV NI			
Operator								Well API No.			
Westland Oil Development Corporation						30-025-24797					
P. O. Box 3651, Conro	e, Tex	as_ 77	30 <u>5</u> -	-3651							
Reason(s) for Filing (Check proper box)					Oth	er (Please explo	zin)			•	
New Well		Change in			Change	of oil	trancno	rtar aft	factive	4/1/92	
Recompletion \square	Oil 7	_	Dry C		Change	. 01 011	cialispo	i cei ei i	eccive	7/1/36	
Change in Operator	Casinghea	a Gas	Cona	ensate						*	
If change of operator give name and address of previous operator		· · · -		 				·-	<u> </u>		
II. DESCRIPTION OF WELL A	AND LEA		T-				77: 1			ase No.	
Lease Name Well No. Pool Name, Including New Mexico 8 State 3 Flying "									f Lease Lease No. Federal or Fee State L-331		
Location Unit Letter N	, 1	980	Feet	From The	West Lin	e and 660) Fe	et From The .	South	Line	
Section 8 Township	, 9	S	Rang			мрм, Lea	ì			County	
III. DESIGNATION OF TRAN				<u> </u>		<u> </u>					
Name of Authorized Transporter of Oil		or Conden			Address (Giv	e address to wi	hich approved	copy of this f	orm is to be se	nt)	
Sun Refining & Marketing Co.						P.O.Box2039, Tulsa, OK 74102, Attn: Reg.Dept.					
Name of Authorized Transporter of Casing		· _ X	or D	ry Gas		e address to wi					
None, used in treater		لنب					••	• • •			
If well produces oil or liquids,	Unit Sec. Twp. Rge.				Is gas actuali	y connected?	When	?			
give location of tanks.	J 8 9S			-	No						
If this production is commingled with that i	from any oth	ner lease or	pool,	give commingl	ing order num	ber:					
IV. COMPLETION DATA											
Designate Type of Completion	- (X)	Oil Well	1	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
Perforations					<u> </u>			Depth Casing Shoe			
								<u> </u>			
TUBING, CASING AND					CEMENTI				CACKS SEMENT		
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			-	SACKS CEMENT		
	-							+			
	-							 			
V. TEST DATA AND REQUES	T FOR	ALLOW	ARI	F	<u> </u>						
	oneman of t	etal voluma	ofloo	ica ad oil and must	he equal to a	r exceed top all	lowable for thi	s depth or be	for full 24 hou	rs.)	
OIL WELL (Test must be after r Date First New Oil Run To Tank			0) 100	id ou and musi	Producing M	lethod (Flow, p	ump, gas lift,	etc.)	,,		
Date First New Oil Run To Tank Date of Test											
Length of Test	Tubing Pr	Tubing Pressure				Casing Pressure			Choke Size		
									O MOD		
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gas- MCF			
GAS WELL	1				1						
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate			
								Choke Size			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size	GIVAL SEC		
VI. OPERATOR CERTIFIC	'ATE O	F COM	PLIA	ANCE					DIV // C1/	5 N I	
I hereby certify that the rules and regu						OIL COI	NSERV	AHON	DIVISIO	אכ	
Division have been complied with and that the information given above						MAR 10'57					
is true and complete to the best of my	knowledge :	and belief.			Dat	e Approve	ed				
α		_				· · · · · · · · · · · · · ·					
Jean Powell					Rv	€ _iou in in			M. Oh		
Signature (/					by -		*		. 14.		
Jean Powell - Product	tion_A	maiyst	Titl	<u></u>	T:A1.	_					
3/5/92	4	09/582		•	Intle	9					
Date	<u>.</u>		lephon								
			-								

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.