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

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I.

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

DISTRICT III 1000 Rio Brizos Rd., Aziec, NM 87410

State of New Mexico Energy, Minerals and Natural Resources Department

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator							API No.		• • • • • • • • • • • • • • • • • • •	
Davero, Inc.							30-025-24995			
2124 Broadway	Lubbock, Tex	as 79401	L <sub>.</sub>							
Rezson(s) for Filing (Check proper bo	•		<u> </u>	XX Out	er (Please expl	ain)			·	
New Well	Change in Transporter of: Effective date 12-1-90									
Change is Operator	Oil Casinghead Gas	Dry Gas Condennat								
If change of operator give name and address of previous operator	Kerr-McGee Co			0x 11050		and, TX		·	<u></u>	
II. DESCRIPTION OF WEI		<u></u>		24 11050	11101	<u>and, 1</u> 2	79702			
Lease Name								<u>,                                     </u>		
Davenport	1					d of Lease (FEE) Lease Na e, Federal or Fee				
Unit LetterH		Feet From	The Ea	ist Lin	1980		Seet From The	North	Line	
Section 17 Town	nship 95	Range	38E		_	ea				
					<u>mrm, L</u>	<u>ca</u>			County	
III. DESIGNATION OF TR	ANSPORTER OF	OIL AND 1		RAL GAS	e address to wh	ick approve	d come of this t			
Lantern Petroleum	Company	<u>"</u>	บ	P.O. B	ox 2281		land, T		<i>N</i> )	
Name of Authorized Transporter of Ca OXY NGLUSTIC.	uinghead Gu 🗌	or Dry Ga			e address 10 wh	uch approve	d copy of this f	orm is to be se		
If well produces oil or liquids,	Unit Sec.			P.O. B	<u>ox 300</u>	Tulsa	, OK 74		•	
give location of tanks.	Unit   Sec.  H   17	1747   95	Rge. 38E	ligarachuall) Yes	connected?	Whe				
If this production is commingled with t IV. COMPLETION DATA		or pool, give co	ommingli	ag order numb	жг.	l	1/76	)		
Designate Type of Completi		ell Gas	Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Rei'v	
Date Spudded	Date Compl. Ready	Lo Prod.		Total Depth		l	P.B.T.D.	i		
Elevations (DF, RKB, RT, GR, etc.)	Name of Destudies							( <b>r</b> .8.1. <b>)</b> ,		
			Top OlVGes Pay			Tubing Dep	Tubing Depth			
Perforations				····			Depth Casin	g Shoe		
	TIBINO	CASING		TENENTTN	IG RECORI					
HOLE SIZE	CASING &	UBING SIZE			DEPTH SET	<u> </u>	e	ACKS CEME		
						SACKS CEMENT				
		·····		<b></b>		<del></del>				
		······································		·			+			
V. TEST DATA AND REQU OIL WELL Test must be after			<u></u>				_ <u></u>	<u></u>		
Dute First New Oil Run To Tank	Date of Test	e of load oil ar	nd must b	e equal to or e	exceed top allow	wable for thi	s depth or be f	or full 24 hour	s.)	
	Date of rea	Date of Test Producing Method (Flow, pump, gas lift, etc.)								
Leogth of Tex	Tubing Pressure	Tubing Pressure		Casing Pressure			Choke Size			
Actual Prod. During Test	Oil - Bbls.			Water - Bbls			Gu- MCF			
		·								
GAS WELL										
Actual Prod. Test - MCF/D	Length of Test	Length of Test		Bbls. Condensate/MMCF			Gravity of Condensate			
l'esting Method (pilor, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size			
VI. OPERATOR CERTIFIC			r			<u> </u>	L			
I hereby certify that the rules and reg	ulations of the Oil Conse	rvation		· O	IL CONS	SERVA		IVISIO	N	
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				Date Approved						
Jand Sam	1 time			Date /	Approved			- 1001		
Signature David Turrentin	ne Pr	resident		Ву			Ŧ.			
Printed Name		Title								
<u>1-18-91</u> Date	806	763-2252 phone No.	2	i ilie						
Sufficients and a superior of the second		price NO.			-					

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

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- 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.