ubmit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resource Department

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

OIL CONSERVATION DIVISION

DISTRICT II

P.O. Drawer DD, Artesia, NM 88210

P. O. Box 1088 Santa Fe, New Mexico 87504-2088

DISTRICT III

1000 Rio Brazos Rd., NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION

I. TO TRANSPORT OIL AND NATURAL GAS

Operator MAERSK ENERGY Inc.									Well API No. 30-041-10043					
Address 2424 Wilcrest, Suite 200, Houston, Texas 77042-2753														
Reason(s) for Filing (Check proper box) New Well Change in Transport of:														
,	il] ad Gas [•	/ Gas □ ensate □		1							
If change of operator give name	asingne	au Gas L	_	Cond	ensate _									
and address of previous operator Xeri			mpan	y, P.O.B	ox 5131	1, M	dland, Texas 7	9710						
II. DESCRIPTION OF WELL AND LEASE														
Lease Name Milnesand Unit	.					uding Formation Kind of Lease nd-San Andres State, Federal								
Location Unit Letter G: 1980 Feet From The NORTH Line and 1980 Feet From The EAST Line SW NE Section 7 Township 8S Range 35E NMPM County Roosevelt II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS														
II. DESIGNATION OF TRANSFORTER OF OIL AND NATURAL CAS														
Name of Authorized Transporter of Oil S or Condensate Deline Merketing & Transportation, Inc.							Address (Give address to which approved copy of this form is to be sent) 1600 Smith Street, Houston, Texas 77002							
Name of Authorized Transport of Casinghead Gas 🛭 or Dry Gas 🗆 Warren Petroleum Company						Address (Give address to which approved copy of this form is to be sent) P. O. Box 1589, Tulsa, Oklahoma 74102								
If well produces oil or liquids, give location of tanks.	location of tanks. B 7 8S 35									When? 4-13-64				
If this production is commingled with the IV. COMPLETION DATA	it from	any othe	r leas	es or pool,	give com	mingli	ng order numbe	r:						
Designate Type of Completion - (X)		Oil Well		Gas Well New		Well	Workover	rkover Deepen Plu			Same	Res'v	Diff	
Date Spudded	Date Compl. Ready to Prod.					Total Depth				P.B.T.I	P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	evations (DF, RKB, RT, GR, etc.) Name of Producing Formation						Top Oil/Gas Pay				Tubing Depth			
Perforations										Depth Casing Shoe				
			ri ibii	IG CASIN	G AND	CEME	NTING RECO	3D						
TURING, CASING AND HOLE SIZE CASING & TURING SIZE						DEPTH SET SACKS CEMENT							NT	
HVLE SIZE	CASING & TURING SIZE									MANNA MINISTRA				
V. TEST DATA AND REQUEST FOR ALLOWABLE														
OIL WELL (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 hours.)														
Date First New Oil Run to Tank Date of Test					_	Producing Method				1				
Length of Test	Length of Test Tubing Pressure						Casing Pressure			Choke Size				
Actual Prod. During Test Oil - BBLS						Water - BBLS				Gas - MCF				
GAS WELL														
Actual Prod. Test - MCF/D	Length of Test					Bbls.Condensate/MMCF			Gravity of Condensate					
Testing Method (pilot,back pr.)	Tubing Pressure (Shut-In)				Casing Pressure (Shut-In)			Choke Size						
VI. OPERATOR CERTIFICATE OF COMPLIANCE							<u> </u>	000		A T10-				
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above						OIL CONSERVATION DIVISION MAR 2 3 1993								
is true and complete to the best of my knowledge and belief.						c	ate Approv	/ed		MAR	23	נבבו		
Signature						By <u>DESCRIPTION SERVICES</u>								
Dorothy Duvall Tech.Admin.Asst., Regulatory Affairs Printed Name FED 2 2 Title								्द्रमाण्यः 'ं सी	£7					
Printed Name FEB 2 3 1993 Title 713/783-0376							itle							
Data	Tala	-b Ni	_		1									

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.