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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, Antesia, 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

I		10 THAN	SPC	HIOL	AND NA	I UHAL GA	10/-11/	API No.		
Operator TKL OIL PROPERTIES				30-041-10516						
Address 2343 E. 71st., Ste			, 0	к 74	136					
Reason(s) for Filing (Check proper box) New Well Recompletion	Oil	Change in Tr		ter of:	Oth	es (Please expla	in)			
f change of operator give name					060 S.	Yale,	Ste. 7	07, Tu	ılsa, O	K 7413
and address of provious operator										
II. DESCRIPTION OF WELL Lease Name Federal 21	AND DE	Well No. Po			ng Formation San An	dres Fe		of Lease Federal or Fe	ا م	ease No. 117529
Location Unit Letter	<u>6</u>	<u>60</u> F	eet Fro	m The	<u>W</u> Lin	e and 19	80 F	et From The	æ§	Line
Section 21 Townshi	ip 7S	R	ange	33E	, N	MPM, ROO	sevelt	<u>-</u>		County
III. DESIGNATION OF TRAN	SPORTI			NATU	RAL GAS			e.i :	c	
Name of Authorized Transporter of Oil Mobil Dubelin	, [S] ,e	or Condensat	e			e address to wh				
Name of Authorized Transporter of Casin	ghead Gas	ŞZ 01	Dry (e address to wh	uch approved	copy of this	form is to be se	:nt)
If well produces oil or liquids, give location of tanks.	Unix	Sec T	w ₂	Rge.	ls gas actuali	-	When	?		
If this production is commingled with that	from any ot	her lease or po	ol, give	e comming!	ing order hum	ber:				
IV. COMPLETION DATA	an.	Oil Well	0	ias Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Designate Type of Completion Date Spudded		ipl. Ready to Pr	rod.		Total Depth	<u></u>	<u> </u>	P.B.T.D.	ļ <u> </u>	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth		
erforations								Depth Casing Shoe		
101010000										
	TUBING, CASING AND							SACKS CEMENT		
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT			
V. TEST DATA AND REQUE	ST FOR	ALLOWAL	BLE					in danch on he	for full 24 hou	me)
OIL WELL (Test must be after Date First New Oil Run To Tank	Date of T		load o	oil and musi	Producing M	ethod (Flow, pu	emp, gas lift,	etc.)	jor juli 24 noi	<u> </u>
Length of Test	Tubing Pressure				Casing Pressure			Choke Size		
Actual Prod. During Test	Oil - Bbls.				Water - Bbis.			Gas- MCF		
GAS WELL								10	0 1	
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size		
VI. OPERATOR CERTIFIC I hereby certify that the rules and regularization have been complied with and is true and complete to the best of my TKL Oil Properties	lations of the information of th	e Oil Conserval ormation given and belief.	ion			OIL CON	_	-		ON
Signature	1 4	nai			By_	ORIGINA	u saanii	· [17] [4](12](13]		
Norma DeLonais Printed Name		ice-Pre				۵				
4/5/91 Date		918) 492 Teleph	one N) <u>4 /</u>						

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
- 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.