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

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## State of New Mexico .gy, Minerals and Natural Resources Departm

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

DISTRICT III

Santa Fe, New Mexico 87504-2088

1000 Rio Brazos Rd., Aztec, NM 87410	REC	UEST F	OR	ALLOWA	BLE AND	AUTHOR	IZATION				
TO TRANSPORT OIL AND NATURAL GAS								Well API No.			
Xeric Oil & Gas Company								ATTIO.			
Address							<del></del>				
P. O. Box 51311 Mi Reason(s) for Filing (Check proper box)	dland	. Tex	as_ˈ	79710	14 O	ther (Please exp	lain)				
New Well		Change i	•	porter of:			•				
Recompletion	Oil Carlant	L	Dry	-		TA					
If change of operator give same	Casingh	<del>_</del>		lensate [_]		· · · · · · · · · · · · · · · · · · ·	<del></del>	<del></del>			
and address of previous operator Br	eck O	perat.	ing	Corp.	P. O.	Box 911	Breck	enridg	e, Tex	as 76424	
L. DESCRIPTION OF WELL	AND LE		1= :			··					
Lasse Name Well No. Pool Name, Included Milnesand Unit 213 Milnesand					_			id of Lease Fed Lease No.  le, Federal or Fee T. C. 060070			
Location	· · · · · · · · · · · · · · · · · · ·	1 213	1 1-1.1	Inesa	nu-san	Andres	l		LLC	<u>060978</u>	
Unit Letter D	_ :	860	_ Feat	Prom The _	North u	ne and66	<u>0</u> F	eet From The	Wes	tLine	
NW NW Section 20 Townsh	ip 8S		Rang	e 35E		Th 4 Pro. 4		Boogo	··· 1 4		
Section 2.0 TOWING	<u>00</u>		KANK	e JJE	<u></u>	імрм,	·	Roose	vert	County	
II. DESIGNATION OF TRAIN Name of Authorized Transporter of Oil				ND NATU				<del></del>			
Name of Authorized Transporter of Oil X or Condensate  Mobil Pipeline Company						Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas or Dry Gas					P. O. Box 900, Dallas, Texas 75221  Address (Give address to which approved copy of this form is to be sent)						
Warren Petroleum Company			\ <del></del>		P. 0	. Box 1		, Tulsa, Oklahoma 74102			
if well produces oil or liquids, ive location of tanks.	Uzit   L	Sec. 120	Twp.   8S	2	. la gas actual	lly connected? Yes	When	-	-65		
this production is commingled with that V. COMPLETION DATA		. J			ling order nun				-05		
Designate Type of Completion	- (X)	Oil Well		Cas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Resiv	
Date Spudded	Date Com	pi. Ready to	Prod.		Total Depth	<del></del>		P.B.T.D.	<u></u>		
levations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth			
erforations					<u> </u>		·	Depth Casing Shoe			
					··				·		
HOLE SIZE					CEMENTI	NG RECOR					
HOLE SIZE	CA	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT		
	<del> </del>					***	· · · · · · · · · · · · · · · · · · ·	<del> </del>	··		
. TEST DATA AND REQUES	T FOR A	ALLOWA	BLE	,	<u> </u>	**	<del></del>	<u> </u>			
IL WELL (Test must be after r			of load	oil and must					for full 24 hou	rs.)	
nte First New Oil Run To Tank	Date of Te	at .			Producing M	ethod (Flow, pu	mp, gas lýt, e	tc.)			
ength of Test	Tubing Pressure				Casing Press.	ure		Choke Size			
ctual Prod. During Test	Oil - Bbls.				Water - Bbls.	Water - Bbls.			Gas- MCF		
GAS WELL	.l	<del></del>			<u> </u>	······································		ı		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
ctual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate			
sting Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
I. OPERATOR CERTIFIC	ATE OF	COMP	LIAN	NCE			<del></del>	L			
I hereby certify that the rules and regula	tions of the	Oil Conserv	ation			OIL CON	SERV	MOITA	DIVISIO	N	
Division have been complied with and to is true and complete to the best of my k			a above	•	<sub>D-1-</sub>	A	_	,	) .]:J(#)		
1 1 1 .	-				Date	Approved	J		······································		
tranes Housing					By Orig. Signed by Paul Kautz						
Signature Crances Flournoy	Produ	ction	Cle	rk_	-,-	<del></del>	Geologi	utz			
Printed Name 7/31/91			Title		Title.		'STANTORT	3 <b>4</b> j			
7/31/91 Date	(81		9 – 33 bose N								

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.

RECEIVED

**AUG** 1 4 1991

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