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

State of New Mexico
Energy, Minerals and Natural Resources Dej ne

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

Operator							Wall			
•							"	API No.		
Milford Oil Company	у							30-041-10	608	
Address										
c/o Oil Reports & C		ces, 1	Inc.,	Box 75						
Reason(s) for Filing (Check proper bo	XX)	~ .	:_ T		Out	et (Please exp	lain)			
New Well	Oil		in Transp					D66 1/	1 (0)	
Recompletion		_	_					Eff. 1/	1/91	
Change in Operator I change of operator give name	Catangne	ad Gas	_ Conde	marce						
ad address of previous operator			·····	····	,		••			
II. DESCRIPTION OF WEI	LI. AND LF	EASE								
Lease Name	32 78.12 832	Well No	Pool N	lame, Includ	ing Formation		Kind	of Lease	i	ease No.
Federal 22		1		averoo	-			Federal or Fee		42253
Location					- ** * * * * * * * * * * * * * * * * *		···············			
Unit Letter P	:_	660	Feet Fi	rom The	South Lin	e and	660	Feet From The	Eas	<u>t</u> .

Section 22 Town	nship 7S	3	Range	33E	, N	MPM,		Roo	sevelt	Count
Energy Operating LP LETT DESIGNATION OF TR. Name of Authorized Transporter of Or										
REPESIGNATION OF TR	ANSPORT	CR OF C	IL AN	DNATU	RAL GAS			· · · · · · · · · · · · · · · · · · ·		
Paran Oil Example 5	W XX	OFTIGEROR	de 1 0		Address (Giv	e address to w		d copy of this fo		
Enron Oil Trading & T Name of Authorized Transporter of Ca								n, TX 7		
Name of Authorized Transporter of Ci Approval from BLM to	•	ed 12/	or Dry / ว.ว. / ค.ร		Address (Giv	e aaaress to w	nich approve	d copy of this fo	orm is to be se	ent)
If well produces oil or liquids,	Unit	Sec.	7wp.		Is gas actuall	v connected?	Whe	n ?		
ive location of tanks.	l P	22	7S	1 33E		No	i whe	m 1		
this production is commingled with the		4			<u> </u>					
V. COMPLETION DATA	•		•	_	J					
	ar.	Oil Wel	11	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res
Designate Type of Completi			L_		1			1 1		Ĺ
Date Spudded	Date Com	ipi. Ready t	to Prod.		Total Depth			P.B.T.D.		
					7 000					
Elevations (DF, RKB, RT, GR, etc.)	Name of F	Producing F	ormation		Top Oil/Gas	Pay		Tubing Deptl	h	
Perforations										
CITALEGOLI					····					
					· · · · · · · · · · · · · · · · · · ·			Depth Casing	Shoe	
		HIDDIC	CASD	NC AND	COL CENTRO	IC PECON	D	Depth Casing	Shoe	
UO E 075					CEMENTI					- ALT
HOLE SIZE		TUBING SING & T				NG RECOR DEPTH SET			Shoe	ENT
HOLE SIZE										ENT
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HOLE SIZE 7. TEST DATA AND REQU	CA	SING & T	UBING S							ENT
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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.