Image: Section 2010       OIL CONSERVATION DIVISION         Participation       Provide 2010         Provide 2010       Provide 2010         Provide 2010 <t< th=""><th>STATE OF NEW MEXICO IGY AND MINERALS DEPARTMENT</th><th>-</th><th></th><th></th><th></th><th><u>.</u></th><th></th><th>Form C-104 Revised 10-</th><th>1-78</th></t<>	STATE OF NEW MEXICO IGY AND MINERALS DEPARTMENT	-				<u>.</u>		Form C-104 Revised 10-	1-78
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ADDITION 224 TIDN 10 TRANSPORT OL AND MATURAL GAS Characters Operating Company, Inc.  Characters C	AND REQUEST FOR ALLOWABLE								
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Address       Constructions, Inc., P. O., Box 763, Robbe, NM 88241         Arring 10 prefar for this (cred report bar)       Compare in Transformer etc.         Difference (construction)       Compare in Transformer etc.         Difference (construction)       Compare in Transformer etc.         Difference (construction)       Construction)	PROBATION OFFICE	Tao							
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charge of swareship bits APP       Monument, Resources, Inc., 5100 N, Recokline, Suite 700, Oklahoma City, Oklahoma City, Oklahoma 77056         Description OF WFLL AND LEAS:       Internet in the second of	Ē	· · ·		• 🗌 Ef	fectiv	e May l,	1984		
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Constant       Vet Res. Proof Notes, Encloyed Formation       Kind of Least       Lister Wind       2       Todd Upper San Andreas       Dist. Farteria or Fee State       0C - 90         State       "BAT       2       Todd Upper San Andreas       Dist. Farteria or Fee State       0C - 90         Unit Letter       H       :       1980.       Feet From The East       County         Unit Letter       H       :       1980.       Feet From The North       East       County         Unit Letter       H       :       1980.       Feet From The East       County       County         Unit Letter       H       :       1980.       Feet From The East       County       County         Unit Letter       H       :       1980.       Feet From The East       County       County         Unit Letter       H       :       1980.       Feet From The East       County County       County	ESCRIPTION OF WELL AND	LEASE							
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Unit Letter		2 Todd	<u>Upper San</u>	Andres		State, Federal	or Foo Sta	ateO	<u>G -90</u>
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J. M. Petroleum Corp.       2000 N. Tower, Plaza of the Americas, Dallas, T.         Schedeling Service       011 6 Gas Corp.       Address Consected to Michael Approved copy of Nummer to the sent Schedeling Consected to Michael Approved copy of Nummer to Sent.       Address Consected to Michael Approved copy of Nummer to Sent.         Schedeling Service       011 6 Gas Corp.       P. O. Box 300, Tulsa, Oklahomg 74102       Sent Sent Sent Sent Sent Sent Sent Sent	ESIGNATION OF TRANSPOR	1 XX or Condensate		Address (Give					
Add B Andonier Control 0       0.1       6.0       Box 300, Tulsa_Oklahomg 74102         It will produces all of Hauda.       Unit is See, Twp, Rep.       Twp, Rep.       Twp, Rep.       Twp, Rep.         It will produces all of Hauda.       A 1 3 3 73 134 78 132       Twp, Rep.       Twp, Rep.       Twp, Rep.         Other Lease and Secondary Completions - (X)       It will produce all of Hauda.       7/8/68         Distributions International Completion - (X)       It will produce all of Hauda.       Prive Box. Secondary Rep. (Distribution)         Designate       Distributions (DF, RAB, RT, CR, etc.;)       Nom of Producing Formation       Total Depth         Designations       Depth Casing Shoet       Tubing Depth       Prive Box. Secondary         Definitions       Depth Casing Shoet       Depth Casing Shoet       Depth Casing Shoet         Tubing Depth       Tubing Depth       File Casing Shoet       Sack Science of Sack	J. M. Petroleum Corp.								
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this production is commingled with that from any other lease or pool, give commingling order number:         ONITESTION DATA         Designate Type of Completion - (X)         Oil Wall       Gas Well         New Well       New Well         New Well       New Well         Designate Type of Completion - (X)       Oil Well         Gas Well       New Well         New Well       Provide         Devided       Dev. Completion - (X)         Devided       Devided Producting Permution         Tubing Depth       Tubing Depth         Number of Producting Permution       Top Oil/Cas Pery         Tubing Depth       Sacks CEMENT         Depth Casing Size       Depth Casing Size         Depth SET       Sacks CEMENT         Sack Strence       Deve of Text         Producting Method Flow, pump, get bift, etc./         Tubing Pressure       Cosing Pressure         Clobe Size       Clobe Size         Diff. Strence       Diff. Conservestion         Lig Well, Mark Text Size Pr./       Tubing Pressure         Clobe Size       Clobe Size			•			- 1 1110		/8/68	
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Jare Spunded       Dare Compl. Ready to Prod.       Total Depth       P.B.T.D.         Jereations <i>IDF, RAB, RT, CR, etc.,</i> Name of Producing Formation       Top OL/Gas Pay       Tubing Depth         **reforations       Depth Casing Shoe       Depth Casing Shoe         **reforations       Depth Casing Shoe <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>Plug Back</td> <td>Same Restv.</td> <td>Dill. Restv.</td>							Plug Back	Same Restv.	Dill. Restv.
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Average and the state of t	Jate Spudded	Date Compl. Heady to F	,10 <b>d</b> *	Iotal Depth					
TUBING, CASING, AND CEMENTING RECORD           HOLE SIZE         DEPTH SET         SACKS CEMENT           DETEST DATA AND REQUEST FOR ALLOWABLE         (Treit must be difference) food oil and must be equal to or exceed top allow           DETEST DATA AND REQUEST FOR ALLOWABLE         (Treit must be difference of full 26 hours)           DETEST DATA AND REQUEST FOR ALLOWABLE         (Treit must be difference of full 26 hours)           DETEST DATA AND REQUEST FOR ALLOWABLE         (Treit must be difference of full 26 hours)           DETEST DATA AND REQUEST FOR ALLOWABLE         (Treit must be difference of full 26 hours)           DETEST DATA AND REQUEST FOR ALLOWABLE         (Treit must be difference of full 26 hours)           Choise State           Choise State	Lievations (DF, RKB, RT, GR, etc.)	Name of Producing For	motion	Top Cil/Gas I	Ραγ		Tubing Dept	h	
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Actual Prod. During Test       Dil-Bbis.         GAS WELL       Actual Prod. Test-MCF/D       Length of Test         Bbis. Condeneate/MMCF       Gravity of Condeneate         Tubing Pressure (Shut-in)       Choke Size         Cesting Method (pilot, &ack pr.)       Tubing Pressure (Shut-in)       Choke Size         Cesting Method (pilot, &ack pr.)       Tubing Pressure (Shut-in)       Choke Size         Cesting Viewer (Shut-in)       Dill CONSERVATION DIVISION         PERTIFICATE OF COMPLIANCE       DIL CONSERVATION DIVISION         hereby certify that the rules and regulations of the Dil Conservation given livision have been complied with and that the information given livision have been complied with and that the information given livision have been complied with and that the information given livision have been complied with and complete to the best of my knowledge and belief.       DISTRICT I SUPERVISOR         Moment Lagent       Agent       If this is a request for allowable for a newly drilled or deepene well, this form must be accompleted with #ULE 1104.         If this is a request for allowable for a newly drilled or deepene well, this form on the accompleted with accompleted with accompleted with able to the deviation of the deviation of the deviation of the form must be accompleted with accompleted wile.         (Trile)       S/10/84       Fill out only Sectione 1, ll. Ill, and VI for changes of conductor of other such change of condition					. <u></u>		Gga + MCF	<u></u>	
Actual Prod. Test-MCF/D       Length of Test       Bbls. Condensate/MMCF       Gravity of Condensate         Testing Method (pilot, back pr.)       Tubing Pressure (shut-in)       Choire Size         TERTIFICATE OF COMPLIANCE       DIL CONSERVATION DIVISION         hereby certify that the rules and regulations of the Dil Conservation fivision have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.       DIL CONSERVATION DIVISION         Max 1.5 1984       .19	Actual Prod. During Test	Oll-Bble.		wgier-Bbis.					
Actual Prod. Test-MCF/D       Length of Test       Bbls. Condensate/MMCF       Gravity of Condensate         Setting Method (pitot, back pr.)       Tubing Pressure (shut-in)       Choire Size         Centing Method (pitot, back pr.)       Tubing Pressure (shut-in)       Choire Size         CERTIFICATE OF COMPLIANCE       DIL CONSERVATION DIVISION         hereby certify that the rules and regulations of the Dil Conservation       DIL CONSERVATION DIVISION         hereby certify that the rules and regulations of the Dil Conservation       DIL CONSERVATION DIVISION         hereby certify that the rules and regulations of the Dil Conservation       DIL CONSERVATION DIVISION         hereby certify that the rules and regulations of the Dil Conservation       DISCRICT I SUPERVISION         hereby certify that the rules and complete to the beat of my knowledge and belief.       DISTRICT I SUPERVISOR         Max Made       (Signolwe)       DISTRICT I SUPERVISOR         May Makes       (Signolwe)       This form must be arequest for allowable for a newly drilled or despense         (Signolwe)       Agent       All ections of this form must be filled out completely for allow         (Taile)       S/10/84       Fill out only Sections 1, III, III, and VI for changes of condition								·	
DIL CONSERVATION DIVISION Division have been complied with and that the information given bove is true and complete to the best of my knowledge and belief. DISTRICT I SUPERVISOR TITLE DISTRICT I SUPERVISOR TITLE This form has to be filed in compliance with FULE 1104. If this is a request for allowable for a newly drilled or despens well, this form must be accompanied by a tabulation of the deviation teste taken on the well in accordance with FULE 1104. Agent (Taile) 5/10/84 Fill out only Sections 1, 11, and VI for changes of condition		Length of Teet		Bbis. Condens			Gravity of C	ondensate	
hereby certify that the rules and regulations of the Oil Conservation bivision have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.	Testing Method (pitot, back pr.)	Tubing Pressue (Shat	-in )	Casing Press	w• (Shut-	-in)	Choke Size		
hereby certify that the rules and regulations of the Oil Conservation ivision have been complied with and that the information given bove is true and complete to the best of my knowledge and belief.	ERTIFICATE OF COMPLIAN	CE		1		ONSERVAT	ION DIVIS	ION	
hereby certify that the rules and regulations of the Oil Conservation ivision have been complied with and that the information given pove is true and complete to the best of my knowledge and belief.		•				ΜΔΥ 1	5 1984	11	
District i Supervisor         District i Supervisor         District i Supervisor         Title         District i Supervisor         Distri Supervisor         District i Supervis	taining have been complied with	h and that the informet	tion given					(TON	
Morna Lallo       This form is to be filed in compliance with FULE 1104.         If this is a request for allowable for a newly drilled or despens well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accondance with MULE 111.         Agent       All sections of this form must be filled out completely for allowable on new and recompleted wells.         (Tule)       5/10/84         Fill out only Sections 1, 11, 111, and VI for changes of owned well means or number, or transporter, or other such change of condition	bove is true and complete to th	e best of my knowledg	'r wiid Deitet	1	D	ISTRICT I SU	PERVISOR		
Jone       Jone         Jone				EI					
(Signature) Agent (Title) 5/10/84 (Title) 5/10/84 (Title) (	11 11	M		This f	orm is to	to filed in c	ompliance w	why defiled	or descene
Agent       All sections of this form must be filled out completely for allow         (Title)       5/10/84         Fill out only Sections I, II, III, and VI for changes of owned well name or number, or transporter, or other such change of condition	Wornh Jok	<u>e</u> 2		11	from month	1	100 DY 5 160	Tristion of a	he deviatio
(Tile) 5/10/84 Wall name or number, or transporter, or other such changes of condition	• •			Il tente takes	n on the '	well in accor	dance with i		
5/10/84 Fill out only Sections 1, 11, 111, and VI for changes of owned well name or number, or transporter, or other such change of condition	and the second secon	ile)		li able on ne	w and re-	completed We	114.		
(Date) . (Date)		5/10/84	· · · · · · · · · · · · · · · · · · ·	11			111 and V	I for change uch change	of condition
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STATE OF NEW MEXICO HGY AND MINERALS DEPARTMENT	OIL CONSERVA	TION DIVISION	Form C-104 Revised 10-1-78
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Image: Participant in the second se	SANTA FE, NEW	MEXICO 87501	
U 6.U.8. LAND OFFICE	REQUEST FOR	ALLOWABLE	
TAANSPORTER GAS		VD PORT OIL AND NATURAL GAS	
PADRATION PADRATION OFFICE			
Monument Resources.	Inc.		
5100 N. Brookline, Su	<u>ite 700, Oklahoma City,</u>	Ok. 73112 Other (Please explain)	
Reason(s) for filing (Check proper box) New Well	Change in Transporter of:		
Recompletion	Chainghead Gas Conden		
Change in Ownership			
If change of ownership give name and address of previous owner			
DESCRIPTION OF WELL AND I	Well No. Pool Name, Including Fo	ormation Kind of Lea	se Lease No.
State BA	2 Todd/Upper Sam	Come Forder	rol or Foo State 06-90
	)Freet From The <u>North</u> LIn	e and 660 Feet From	The East
Unit Letter <u>H</u> : 1980		Page	sevelt County
			Sevent county
DESIGNATION OF TRANSPORT	TER OF OIL AND NATURAL GA	S Address (Give address to which appr	roved copy of this form is to be sent)
J.M. Petroleum Corp. Name of Authorized Transporter of Cas		200 N. Tower, Plaza of Address (Give address to which appr	mericas Dallas. Tx. roved copy of this form is to be sent)
Cities Service Co.		Cities Service Bldg., 1	Tulsa, Oklahoma
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.	Is gas octually connected? W	/hen
If this production is commingled wit	h that from any other lease or pool,	give commingling order number:	
COMPLETION DATA Designate Type of Completio	n - (X)	New Well Workover Deepen	Plug Back Same Restv. Diff. Restv.
Designate 1/po of compare	Date Campl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, GR, etc.)	Name all Producing Formation	Top Oll/Gas Pay	Tubing Depth
		l	Depth Casing Shoe
Perforations			
HOLE SIZE	TUBING, CASING, AND	D CEMENTING RECORD	SACKS CEMENT
	DR ATTOWARIE (Test must be a	fire recovery of total volume of load o	il and must be equal to or exceed top allow-
TEST DATA AND REQUEST FO	able for this de	pth or be for full 24 hours)   Producing Method (Flow, pump, gos	
Date First New Oil Run To Tanks			Choke Size
Length of Test	Tubing Pressue	Casing Pressure	•
Actual Prod. During Test	Cil-Bble.	waler-Bbla.	Gas-MCF
		_]	
GAS WELL Actual Prod. Teel-MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Tubing Pressue (Shut-in)	(Cosing Pressure (Shut-in)	Choke Size
Testing Method (pilot, back pr.)			
CERTIFICATE OF COMPLIAN	CE	NOVER	ATION DIVISION
I hereby certify that the rules and t	regulations of the Oll Conservation	APPROVED INUV D	1982, 19
Division have been complied with above is true and complete to the	e best of my knowledge and belief.	BY_CHALL Whe	SINDRECIUR
	$\circ$		
La Jame (D. J	charff-	11	in compliance with MULE 1104. lowable for a newly drilled or despense unstat by a tabulation of the deviation
• •	aiwe)	well, this form must be accom	curdance with MUCK 111.
Warren W. Schaeffer,	Lanoman	All sections of this form	must be filled out completely for allow-
Name 1 1092	ile)	able on new and recompleted	- ++ +++A UI for chences of owner-
November 1, 1982	ate)	Fill out only Sections I.	, 11, 111, and VI for changes of owner- norter, or other such change of condition- sumt be filed for each pool in multiply

GTATE OF NEW MEXICO	OIL CONSERVA	TION DIVISION	Form C-104 Revised 10-1-78
DIS 1 0 10 (1) 100	י. ס. 80 SANTA FE, NEW		
1 A H T A 7 8	SANIA PE, NEW		
LAND DFFICE	REQUEST FOR		
TRANSPORTER UAB	AN AUTHORIZATION TO TRANSPO		
OPERATOR PADRATION OFFICE Operator			
Monument Resour	ces, Inc.		
Address 5100 N. Brookli:	ne, Suite 700, Oklaho	oma City, Oklahoma 7	3112
Reason(s) for filing (Check proper box)		Other (Picase esplain)	
New Well	Oil Dry Gas		
Change in Ownership	Casinghead Gas Condens		
nd address of previous owner		ration, One River Wa	y, Houston, Tx. 77056
DESCRIPTION OF WELL AND I	Todd/IInper Sar	rmation Kind of Leas	Lesse No. Il or Fee State 06-90
State BA	2 1000/0pper sar		]
	0Feet From The <u>North</u> Line	and <u>660</u> Feet From	The East
	mahip 7South Range 35	5E , NMPM, ROOS	evelt County
		c	
DESIGNATION OF TRANSPORT None of Authorized Transporter cf Oli	TER OF OIL AND NATURAL GAS		
	rude Corporation	2454 Industrial Blv Address (Give oddress to which oppro	d. Abilenes TX. 7960 wed copy of this form is to be sent)
Cities Service	Co.	Cities Service Bldg	., Tulsa, Oklahoma
il well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge.		·····
f this production is commingled wit	th that from any other lease or pool,	give commingling order number:	
COMPLETION DATA Designate Type of Completic	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'
Designate Type of Completic	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	1 Destantes Foregrien	Top Oil/Gas Pay	Tubing Depth
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Depth Casing Shoe
Perforations			Depin Cashiy one
		CEMENTING RECORD	SACKS CEMENT
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	JACKS CEMENT
TEST DATA AND REQUEST F	OR ALLOWABLE (Test must be of oble for this de	fer recovery of total valume of load oi opth or be for full 24 houre)	l and must be equal to ar exceed top allo
OIL WELL Date First New Oil Run To Tanss	Date of Test	Producing Method (Flow, pump, gas	lift, etc.)
	Tubing Pressure	Casing Presewe	Choke Size
Length of Test		Wglet - Bbls.	Gas - MCF
Actual Prod. During Test	Oil-Bhis.		
GAS WELL Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
Testing Method (pitor, back pr.)	Tubing Pressure (Shnt-in)	Cooing Pressue (Shut-im)	Choke Size
Leating Method (publi, and pro-			
CERTIFICATE OF COMPLIAN	CE	NOV 1	ATION DIVISION
hereby certify that the rules and	regulations of the Oil Conservation	APPROVED	1
hereby certify that the fold with hivision have been complied with bove in true and complete to th	e best of my knowledge and belief.	BY CALL US	S INSPECTOR
		16	
	lone		n compliance with RULE 1104. owable for a newly drilled or deepend vanied by a tabulation of the deviati-
	naiwe)	well, this form must be accom	ordance with MULE 111.
Larry P. Moore	Vice President	All sections of this form t	wells.
0ctober 1, 198		Fill out only Sections 1.	[11, 111, and VI for changes of condition
	Jaiej	Separate Forma C-104 m	ust be filed for each pool in multip

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completed wells.



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STATE OF NEW MEXICO FINGY AND NUCLINES DEPARTMENT			Form C-104 Revised 10-1-78
		OX 2088	
#AN1A ##	SANTA FE, NE	W MUXICO 87501	
U B () B,			
TRANSPORTER OIL		OR ALLOWABLE	
OAS		AND SPORT OIL AND NATURAL GAS	
PROBATION OFFICE	And a Chard		
MONUMENT RES	OURSEST INGT		······
5100 North B	rookline Suite 700		lahoma 73112
Reason(s) for filing (Check proper b	201 )	Other (Please explain)	
New Well	Change in Transporter of: Cil X Dry (		
Change in Ownership	Casinghead Gas 🚺 Cond	ensale 🔲	
If change of ownership give name	2		
and address of previous owner			
DESCRIPTION OF WELL AN	DLEASE	√	
Lease Name	2 Todd - San		- State
State BA	2 Todd A San	Allules Stole, Ped	erol or Fee State 06-90
Unit Letter H : 19	80 Feel/From The North L	ine and 660 Feet Fro	m The East
	X	25,	
Line of Section 34	ranhip 7 Frange	34E , NMPM. ROOSE	velt County
	RTER OF OIL AND NATURAL G	AS	
Nome of Authorized Transporter of C	or Conder.sate		proved copy of this form is to be sent)
U International Cru None of Authorized Transporter of C	ide Corporation		1vd. Abilene, Tx. 7960
Cities Serie	uce Co		
If well produces oil or liquida,	Unit Sec. Twp. Rge.	Is gas actually connected?	When
give location of tanks.		i	
If this production is commingled v COMPLETION DATA	with that from any other lease or pool,	, give commingling order number:	
Designate Type of Complet	ion - (X)	New Well Workover Deepen	Plug Back Same Res'v. Diff. Res'
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Linvations (DF, RKB, KT, GR, eic.)	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth
Perforations	<u> </u>	<u> </u>	Depth Casing Shoe
		D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	
			il and must be equal to or exceed top allow
OIL WELL	able for this di	enth or be for full 24 hours)	
Date First New Cil Hun To Tunks	Date of Test	Producting Method (Flow, pump, gos	lift, etc.)
Length of Twet	Tubing Pressure	Cusiny Presewe	Choke Size
Actual Prod. During Test	QII-Bble.	Water-Bbls.	Gos-MCF
GAS WELL			
Actual Frod. Teet-MCF/D	Longth of Tool	Bble. Condensate/MMCF	Gravity of Condeneate
Teeling beethod (pilot, back pr.)	Tubing Presews (Shut-in)	Casing Pressure (Shut-10)	Choke Size
SERTIFICATE OF COMPLIAN	iCE		TION DIVISION
	regulations of the Oll Conservation		
Division have been complied with bove is true and complete to th	h and that the information given a beat of my knowledge and belief.	ORIGINAL SIGHT	
7		TITLE DISTRICT I SUP	
- 1 - 1 - 1			compliance with RULE 1104.
- 2m P. M	oore	If this is a request for allo	wable for a newly drilled or deepene
(5.0	alwe)	tests taken on the well in acco	
Vice-President			ust he filled out completely for allow
June 1, 1982	-	I have only Sections 1	11 III and VI for theorem of owner
(1)	at <b>e j</b>	Seriarate Lorina C-104 mil	iter, or other such thange of conditionation of the filed for such pool in multip
		realization wells.	

L	OF COPIES N. LEIVES			
ļ	DISTRIBUTION	NEW MERCOR LAND	JOMMISSIUM	Form C+104
	ANTA FE			Bupersed Old C-104 and C-1
			•	Effective 1-1-65
1	.s.g.s.		C D NATURAL	GAS
	AND OFFICE	_		
ſ	RANSPORTER OIL GAS			
0	PERATOR			
· —	PRORATION OFFICE			
	perator			
A	Monument Energy Corp	oration		· · · · · · · · · · · · · · · · · · ·
R	Box 1476, Lovington, eason(s) for filing (Check proper bo	New Mexico 88260	euse explain)	
1	ew Well	Change in Transporter :	Change of name	1
R	ecompletion	011	-	t Minerals, Inc.
CI	hange in Ownership	Casinghead Gas		
L If e	change of ownership give name		·	
	d address of previous owner			
	ESCRIPTION OF WELL AND	Well No. Pool Mar 9 Jac	Kind of Lea	se Lease No.
	BA		State, Fede	cal or Fee
L	ocation	2 Todd, San Andres		State 05 90
	Unit Letter ; 19	80 Feet From The North	660 Feet From	The
	Line of Section 34 T	ownship 7 35	Roo	county
DE	FSIGNATION OF TRANSPOR	TER OF OIL AND NATURAL		
	ame of Authorized Transporter of O	11 💽 or Condensate	to which appr	oved copy of this form is to be sent)
	<b>Mobil 011 Corporati</b> ame of Authorized Transporter of C	asinghead Gas Bringhead Gas	x 900, Dallas, Tex	oved copy of this form is to be sent)
	Cities Service 011	• · · · · · · · · · · · · · · · · · · ·	x 300, Tulsa. Okla	
Tf	well produces oil or liquids,	Unit Sec. There are		hen
	ive location of tanks.	<b>A 34</b> 7 35	Yes	Prior to acquisition
	this production is commingled w	th that from any other load	number:	
'. CC	OMPLETION DATA	Oil Well	Deepen	Plug Back Same Restv. Diff. Rest
	Designate Type of Complet gte Spudded	Date Compl. Ready to France		P.B.T.D.
El	evations (DF, RKB, RT, GR, etc.,	Name of Producing Former		Tubing Depth
P	erforations	a de anti-		Depth Casing Shoe
		TUBING, CASES	0 <b>3D</b>	
	HOLE SIZE	CASING & TUBING SALT	ъ.Т	SACKS CEMENT
	·····		· • • · · · · · · · · · · · · · · · · ·	
			- 12	
		1		<u></u>
	EST DATA AND REQUEST I IL WELL	FOR ALLOWABLE Tes Marster and Allowable for a second secon	a a∾e of <b>load oi</b> area	l and must be equal to or exceed top allo
	ate First New Oil Run To Tanks	Date of Test	a, pamp, gas	lift, etc.)
L	ength of Test	Tubing Pressure	- · · · · · · · · · · · · · · · · · · ·	Choke Size
	ctual Prod. During Test	Oil-Bbis.	1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	Gas - MCF
	·····			
G	AS WELL			
A	ctual Prod. Test-MCF/D	Length of Test	i kanal	Gravity of Condensate
Ŧ	esting Method (pitot, back pr.)	Tubing Pressure (Shut-ia)	( <b>ci-12</b> )	Choke Size
. CI	ERTIFICATE OF COMPLIAN	NCE		ATION COMMISSION
				, 19
C.	mmission have been complied	with and that the information of the second	· . · <u></u>	Orig. Signed by
ab	ove is true and complete to the	e best of my knowledge and collect		Joe D. Ramey
				Dist. I, Supv.
	HORMERT INTROT CORP.			

President (Title)

April 11, 1974

(Date)

a request for allowable for a newly drilled or deepened in last be accompanied by a tabulation of the deviation in the well in accordance with RULE 111.

... to be filed in compliance with RULE 1104.

not ena of this form must be filled out completely for allow-

By Sections I, II. III, and VI for changes of owner, be umber, or transporter, or other such change of condition.

ł	NO. OF COPIES RECEIVED		$\sim$			
ł	DISTRIBUTION		DISERVATION COMMISS	Form C-104		
	SANTA FE	REQUEST F	OR ALLOWABLE	Supersedes Old C-104 and C-1,		
	FILE		AND	Effective 1-1-65		
	U.S.G.S.	AUTHORIZATION TO TRAI	NSPORT OIL AND NATUR	AL GAS		
	LAND OFFICE	-				
	TRANSPORTER OIL	-				
	GAS	4				
	OPERATOR	4				
1.	PRORATION OFFICE					
	SILVER M'MUMMUT NINER	ALS. INC.				
	Address					
	Box 1476, Lovington,	New Mexico 88280				
	Reason(s) for filing (Check proper box	<u>,                                     </u>	Other (Please explain	)		
	New Well	Change in Transporter of:				
	Recompletion	Oil Dry Gas	s []			
	Change in Ownership	Casinghead Gas Conden:	sate			
	If change of ownership give name and address of previous owner	iolder Petroleum Corperat:	ion, Box 1476, Lovin	gton, New Mexico AS260		
	and address of previous owner					
Ħ.	DESCRIPTION OF WELL AND	LEASE A				
	Lease Name	Well No. Poor Karde, Including Fo		Lease Lease No.		
	BA	2 Todd San Andres	State, 1	Federal or Fee State 00 90		
	Location	r	/1.7	<b>-</b> .		
	Unit Letter ;;	<b>D</b> Feet From TheLine	e and Feet	From The		
				• ·		
	Line of Section 34 To	wnship 7 Range	35 , NMPM, <b>Ro</b>	County		
Ш.	DESIGNATION OF TRANSPOR	TER OF OIL AND NATURAL GA	S	approved copy of this form is to be sent)		
	Name of Authorized Transporter of Oi		1			
	Nobil 011 Corporation		Box 900, Dallas, Te	approved copy of this form is to be sent)		
	Name of Authorized Transporter of Ca					
	Cities Service Cil Co		Box 300, Tulsa, Okl Is gas actually connected?	When		
	If well produces oil or liquids,	Unit Sec. Twp. Pge.	Yes	Prior to acquisition		
	give location of tanks.	A second the second sec				
		ith that from any other lease or pool,	give commingling order numbe	·F:		
IV.	COMPLETION DATA	Oil Well Gas Well	New Well Workover Deep	en Plug Back Same Res'v. Diff. Res'v		
	Designate Type of Completi	on $-(X)$				
	Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.		
	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top Oil/Ges Pay	Tubing Depth		
	Perforations			Depth Casing Shoe		
	2	TUBING, CASING, AND	CEMENTING RECORD			
	HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT		
	L		· · · · · · · · · · · · · · · · · · ·	and all and much be assault to as assault top allo		
V.	TEST DATA AND REQUEST F	FOR ALLOWABLE (Test must be a able for this de	fter recovery of total volume of in opth or be for full 24 hours)	oad oil and must be equal to or exceed top allo		
	OIL WELL Date First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump	, gas lift, etc.)		
	Length of Test	Tubing Pressure	Casing Pressure	Choke Size		
	Actual Prod. During Test	Oil-Bbis.	Water-Bbls.	Gas - MCF		
	·					
	GAS WELL		••••••••••••••••••••••••••••••••••••••			
	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	CERTIFICATE OF COMPLIAN	NCE	OIL CONS	ERVATION COMMISSION		
• -			J	AN 17 12		
	I hereby certify that the rules and	regulations of the Oil Conservation				
	a trater have been complied	with and that the information given he best of my knowledge and belief.				
	above is true and complete to th	ne best of my knowledge and benen.	Dis	it. I. Supr		
	SILVER MONUMENT MINERAL	LS, INC.	TITLE			
	$C_{1}$ $A_{1}$ $A_{1}$		This form is to be fi	led in compliance with RULE 1104.		
	() IIII NA AUDAZ			a allowable for a newly drilled or deepen		
	A. C. Bolder (Sie	(nature)		ccompanied by a tabulation of the deviati n accordance with RULE 111.		
	President	· · ·	tests taken on the well 1	form must be filled out completely for allo		
		Fitle)	able on new and recompli-	eted wells.		
	1-1-73		Till and only Section	ne I II III and VI for changes of own-		
		Date)	well name or number, or tr	ansporter, or other such change of condition		
			Separate Forms C-1	04 must be filed for each pool in multip		
	···· • • • • • • • • • • • • • • • • •					