Submit 5 Copies
Appropriate District Office
DISTRICT 1
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

OIL CONSERVATION DIVISION

P.O. Box 2088

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

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

Santa Fe, New Mexico 87504-2088

L.					LE AND A						
TO TRANSPORT OIL A						011112	Well A	Pl No.			
PLAINS PETROLEUM OPER											
Address 415 W. Wall, Suite 21	10		1	Midland	, Texas		 				
Reason(s) for Filing (Check proper box)					U Othe	er (Please exp	lain)		•		
New Weil	Oil	Change in 7	ranspo Dry Ga								
Recompletion U			Conden	· _							
					on - Unit	ed Bank	Plaza,	Suite 30	00, Rosw	vell, New M 80202	
I. DESCRIPTION OF WELL	AND LE	ASE			. 400	N. Penn	ısylvania			 	
Lease Name Sec	Well No. Pool Name, Including Formation					Kind of Lease Lease No. State) Federal or Fee State K-6454					
Todd Lower San Andres	OHIL	12	100	u Bower	. Dan Inio	1100 1100				K 0434	
Unit Letter	_ :	660	Fect Fr	rom The	West Lin	e and2	180 Fe	et From The _	South	Line	
Section 32 Townsh	ip 75	<u>s</u> .	Range	361	E , N	мрм,	Roose	velt		County	
II. DESIGNATION OF TRAI	NSPORTE	ER OF OI	I. AN	D NATU	RAL GAS	Inj	ection	1.70	il		
Name of Authorized Transporter of Oil	X)	or Conden	ale		Vootese (Cir	e aaaress 10 v	which approved			ent)	
Pride Pineline Company						Box 2436, Abilone, Texas 79604					
	or Dry Gas X or Dry Gas					Address (Give address to which approved copy of this form is to be sent) Bluitt Plant, Milnesand, New Mexico 88125					
Oxy If well produces oil or liquids,		Unit Sec. Twp. Rge.			Is gas actual						
ive location of tanks.	L	32	7 5	1 36 E							
this production is commingled with that V. COMPLETION DATA	t from any oti	her lease of p	ool, gi	ve comming	ling order num	ber:			•		
Designate Type of Completion	1 - (X)	Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl. Ready to Prod.				Total Depth	Total Depth			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas	Top Oil/Gas Pay			Tubing Depth		
Perforations					<u> </u>				Depth Casing Shoe		
								<u> </u>	- -		
		BING, CASING AND			DEPTH SET			SACKS CEMENT			
HOLE SIZE	- CA	CASING & TUBING SIZE				DEFINISET					
	_							_			
V. TEST DATA AND REQUI	ST FOR	ALLOW	BLE	<u> </u>			. !! ! ! C ! !	is double or he	for full 24 ha	urs)	
OIL WELL (Test must be after Date First New Oil Run To Tank	Date of T		of load	oil and mus	Producing N	r exceed top a lethod (Flow,	pump, gas lifi,	esc.)	101 Jan 24 110		
Date i haction on ital to the					<u> </u>			Choke Size			
Length of Test	Tubing Pr	Tubing Pressure			Casing Pressure						
Actual Prod. During Test	Oil - Bbls	Oil - Bbls.				Water - Bbis.			Gas- MCF		
GAS WELL								18: 5: 2			
Actual Prod. Test - MCF/D	Length of Test				Bbls. Conde	Bbls. Condensate/MMCl ²			Gravity of Condensate		
Testing Method (pitot, back pr.)	Tubing P	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size		
VI. OPERATOR CERTIFI	CATE O	F COM	PLIA	NCE		OII CC	NSERV	'ATION	DIVISI	ON	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					B I	Date Approved FEB 2 3 1990					
is true and complete to the best of my knowledge and belief. Source Suchanol					Dat	Date Approved ORIGINAL SIGNED BY JERRY SEXTON					
Signature 2001	nu Z	1 Justu	W		Ву		ORIGINAL SI DISTR	unded by J H <mark>et i supe</mark> r	ERRY SEX	TOM	
Bonnie Husband		Engir	eer.	ing Tec	hil						
Printed Name 2-9-90	-		68	3-4434		5			<u></u>		
Date		Tel	ephone	No.						احسنان	

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.