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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 18240

## 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. Drawe DD, Areda, NM \$2210

## OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brizos Rd., Anec, NM \$7410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

•	1	O TRA	NSP	ORT OIL	AND NAT	URAL GA	5			<del></del>		
Openor Read & Stevens, Inc.							Wall A	so cly	Na. 300 (111 - 2018)			
P.O. Box 1518, 1	Roswell.	NM :	 88202	)								
Reason(s) for Filing (Check proper box)	.coswerr,	1411	00202	<del>-</del>	X Othe	r (Please explai	n)					
New Well		Change in						1 , ,	,	1		
Recompletios 🔲	Oil		Dry G			of tank		4				
hange is Operator	Caringhea	1 Cas	Conde	nate		tanks.				to New		
change of operator give name					mexico	Salt Wat	er bisp	osar co	<u> </u>			
I. DESCRIPTION OF WELL	AND LEA	ASE						<u></u>				
Lease Name		Well No.	Pool N	lame, Includir	g Formation	1		(Lesse	_	ase No.		
Federal B	<u>.                                    </u>	11	1	S. Prair	<b>重e</b> (2.12	1-en R	MOUX,	Rederal och	* NM 05	56301		
Locatios									17			
Uali Letter P	<u> </u>	50	_ Feat P	rom The	S Lin	and <u>660</u>	Fe	et From The	E	Line		
Section 30 Townsh	lp 8S		Range	36E	, NI	ирм,	Rooseve	1t	4	County		
	ianon	D 07 0		TO 314 077 17			*					
III. DESIGNATION OF TRAIN Name of Authorized Transporter of Oil	NSPORTE	or Coade		MD NATU	Address (Giv	e address to wh	ich approved	copy of this f	orm is to be se	ns)		
Gandy Corp.							Address (Give address to which approved copy of this form is to be sent)  P.O. Box 827, Tatum, NM 88267					
Name of Authorized Transporter of Casi	ghead Gas		or Dr	y Gus 🔲	Address (Giv	e address to wh	ich approved	copy of this f	orm is to be se	N)		
14 . 14 . 14 . 14 . 14 . 14 . 14 . 14 .	1754	Sec	Twp. Rge.		Is gas actually connected? When			?				
If well produces oil or liquids, give location of tanks.	Unit	) <b>3</b>	1107	1 ~8~	13 gas accuss	,	14					
If this production is commingled with the	from any ou	er lease or	pool, g	ve comming	ing order num	ber:						
IV. COMPLETION DATA					Y	· · · · · · · · · · · · · · · · · · ·		N - PI	Same Res'v	Diff Res'v		
Designate Type of Completion	1 - (20)	Oil Wel	ш ј	Gas Well	New Well	Workover	Deepen	i hing pack	Same Kes A			
Date Spudded		pl. Ready 1	o Prod.		Total Depth	<del></del>	L	P.B.T.D.	<del> </del>			
			1					· · · · · · · · · · · · · · · · · · ·				
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth				
Perforações								Depth Casing Shoe				
									1			
TUBING, CASING AND					CEMENTI		D	T				
HOLE SIZE	CA	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
								<del>                                     </del>				
				<del></del>	<del>                                     </del>							
V. TEST DATA AND REQUI	EST FOR	ALLOW	/ABLI	E * ** * * * ******			i ahla fan th	la danik ar ha	for full 24 hou	ere l		
OIL WELL (Test must be after Date Fire New Oil Rus To Tank	Date of T		e of local	a ou ana musi	Producing M	ethod (Flow, pu	mp, gas lift,	elc.)	<i>ju jui 24 no</i>			
Date Fire New Oil Rule 10 Tank					· · · · · · · · · · · · · · · · · · ·							
Leagth of Test	Tubing Pr	Tubing Pressure			Casing Pressure			Choke Size				
				Water - Bbls.			Gar MCF					
Actual Prod. During Test	Oil - Bbls.				Watt - Doir							
GAS WELL								<u> </u>				
Actual Proof Test - MCF/D	Langth of	Langth of Test				Bbls. Condensate/MMCF			Gravity of Condensate			
•									A Color State			
Testing Method (pilot, back pr.)	Tubing P	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
VI. OPERATOR CERTIFI	CATE O	F COM	PLIA	NCE	1				D. // 01/			
I hereby certify that the rules and res					11	OIL CON			2"	אכ		
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.							. 1	FFB 1	0 100			
19 TO SE SOUL COMPRESE TO THE DEST OF TH	· momente	Dellei,			Date	e Approve	d		-	<del></del>		
John Malen h					Date Approved FFB 1 6 '92							
Signature ( ) C ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (					By							
John C. Maxey, Jr./Petroleum Engineer					Title	,		,	1			
2/5/92	505/	622-3	770		''''	·						
Date		T	elephon	No.	11	_	¥					

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

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- 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.