Submit 5 Copies
Appropriate District Office
DISTRICT I
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 Instruction 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

I.		TO TRA	NSPC	ORT OIL	AND NA	TURAL GA					
Operator							Wel	API No.		7 / 7 7	
American Explorat	ion Cor	npany		<u> </u>				<u>.30-C</u>	125-0	20627	
Address 700 Louisiana, Su:	i + 0 21(10 II	211.0 t	o = T	owna 77	002-276	0.1				
Reason(s) for Filing (Check proper box)	116 210	JO, 110	Justi	011, 1		et (Please expli					
New Well		Change in	Transpor	ter of:		•	•	tor from	n Pacif	ic	
Recompletion	Oil		Dry Gas				-			effect	
Change in Operator	Casinghead	_	Condens			1, 199		oompan,	, (0511)	CIICCI	
If change of operator give name P	acific	Ente	rpri	ses 0	il Comp						
and address of previous operator						<u> </u>					
II. DESCRIPTION OF WELL	AND LEA	ASE									
Lease Name		Well No.	Pool Na	me, Includ	ing Formation		Kin	d of Lease	L	ease No.	
Cady		1	Mil	nesan	d Penn,	West	Stat	e, Federal or Fe	Fee)		
Location										}	
Unit Letter F	<u> </u>	980	Feet Fro	om The	North _{Lin}	and6	60	Feet From The	West	Line	
Section 19 Townsh	iip 8S		Range	34E	, N	MPM, R	oosev	elt		County	
THE PROJECT AND ADDRESS OF THE ADDRE	MODO DOE	D OF O	FF A 18.TE		TAT CAC						
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil		or Conden		JNATU		e address to w	hich annem	ad come of this	form is to be s	emt)	
•	XX				Address (Give address to which approved copy of this form is to be sent) P. O. Box 1558, Breckenridge, Texas 76						
Koch Services, In Name of Authorized Transporter of Casin						Address (Give address to which approved copy of this form is to be sent)					
or remediate remoposition of Cant	-6	لـــا	J. 217 (wa W W	wpprov	y vy vrus j	w w w w w w w w w w w w w w w w w	,	
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge.	Is gas actuall	y connected?	Wh	en ?			
give location of tanks.	İFİ	19	85	1 34F			i				
If this production is commingled with that	from any oth	er lease or	0			ber:					
IV. COMPLETION DATA											
Desired Tree of Constant		Oil Well	G	as Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion		<u> </u>				<u> </u>	<u> </u>	_1	<u></u>	11	
Date Spudded	Date Comp	al. Ready to	Prod.		Total Depth			P.B.T.D.			
(DE DVO DE CO) C P			<u>.</u>	Top Oil/Gas	Day			- <u>-</u>		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top On Oas	ay		Tubing Der	Tubing Depth		
Perforations								Depth Casin	ng Shoe		
									-B		
· · · · · · · · · · · · · · · · · · ·	<u></u>	UBING.	CASIN	IG AND	CEMENTI	NG RECOR	RD.	!			
HOLE SIZE		CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT		
	1										
						·					
V. TEST DATA AND REQUE											
OIL WELL (Test must be after			of load o	il and musi					for full 24 hou	ers.)	
Date First New Oil Run To Tank	Date of Tes	st			Producing M	ethod (Flow, pr	ump, gas iyi	i, eic.)			
Length of Test	Tubing Dec	Tubing Pressure				Casing Pressure			Choke Size		
Letigui of Test	Tubing Fre	ssure			Casing 1100s	210					
Actual Prod. During Test	Oil - Bbls.	Oil - Bhis				Water - Bbls.					
CACHELL					-l						
GAS WELL Actual Prod. Test - MCF/D	Length of	Foot	 		Bbls, Conder	ente/MMCE		Genuity of	Condensate		
Actual Prod. Test - MICP/D	Lengui or	1 681			Bola. Conde	ISECTIVICI		Clavity of	CONTREME		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
roang montos (phot, see p. ,		`	,			, ,					
VI. OPERATOR CERTIFIC	TATE OF	COM	TIAN	CE	<u> </u>				····		
I hereby certify that the rules and regu				CL	(OIL CON	NSER	VATION	DIVISIO	NC	
Division have been complied with and											
is true and complete to the best of my			/?	,	Date	Approve	ad	MAY 3	1 1991		
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V/1/41/2	:-///,	1 1!! L	1//1	<u> 1 11 /10</u>	D	ي ن ر	ng. Sign	ed by			
Signature	-671				By_		Paul Ka				
Marty B. McClanaha	an. Sr.	Proc	1. Aı Title	nalys	11		Geolog	rr f			
Printed Name May 28, 1991	7 !	13-220		5 1	Title						
Date			phone N		1						

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.

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MAY 3 0 1991

AGREE STREET