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## State of New Mexico Energy, Minerals and Natural Resource Department

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

## **OIL CONSERVATION DIVISION**

DISTRICT II

P. O. Box 1088

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

Santa Fe, New Mexico 87504-2088

1000 Rio Brazos Rd., NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator MAERSK ENERGY Inc.										Well API No. 30-041-20649				
Address 2424 Wilcrest, Suite 200, Houston, Texas 77042-2753														
Reason(s) for Filing (Check proper box)  New Well														
I. DESCRIPTION OF WELL A			iipaiiy,	F, U. B	<u>0x 31311</u>	1411	diand, Texas 7	710				· · · ·		
Lease Name Well No. Pool Name, Inclu Milnesand Unit 524 Milnesan						ing Formation Kind of Lease FEDERAL Lease N I-San Andres State, Federal or Fee LC 0621								
Unit Letter H : 1360 Feet From The North Line and 90 Feet From The East Line Section 13 Township 8S Range 34E NMPM County Roosevelt  II. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS														
Name of Authorized Transporter of Oil or Condensate   Plains Marketing & Transportation, Inc. Price Pepelen							Address (Give address to which approved copy of this form is to be sent)  1600 Smith Street, Houston, Texas 77002							
Name of Authorized Transport of Casinghead Gas ⊠ or Dry Gas ☐ Warren Petroleum Company						Address (Give address to which approved copy of this form is to be sent) P. O. Box 1589, Tulsa, Oklahoma 74102								
If well produces oil or liquids, give location of tanks.	H 13 8S 341			Rge. 34E	If gas actually connected? YES				When? 6-18-82					
If this production is commingled with that from any other leases or pool, give commingling order number:  V. COMPLETION DATA														
Designate Type of Completion - (X)	Oil Well Gas Well Ne			New V	Vell Workover Deepen Plu			Plug	Back	Same Res'v	Diff			
Date Spudded	Spudded Date Compl. Ready to Prod.						Total Depth				P.B.T.D.			
levations (DF, RKB, RT, GR, etc.) Name of Producing Formation						Top Oil/Gas Pay				Tubing Depth				
Perforations						Depth Casing Shoe								
TUBING, CASING AND							CEMENTING RECORD							
HOLF SIZE	HOLF SIZE CASING & TUBING SIZE					DEPTH SET				SACKS CEMENT				
					$\longrightarrow$				-					
V. TEST DATA AND REQUEST FOR ALLOWABLE														
OIL WELL (Test must be after recovery of total volume of load oil and must														
Date First New Oil Run to Tank  Date of Test  Length of Test  Tubing Pressure						Producing Method  Casing Pressure				Choke Size				
Actual Prod. During Test  Oil - BBLS						Water - BBLS				Gas - MCF				
GAS WELL						<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)				Casing Pressure (Shut-In)				Choke Size					
VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation						OIL CONSERVATION DIVISION								
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.						Date ApprovedMAR 2 3 1993								
Signature Signature						By ORIGINAL SIGNED BY JEERLY SEXTON  BIGTMOT 1 SUPERVISOR								
Dorothy Duvall Tech.Admin.Asst., Regulatory Affairs Printed Name FEB 2 3 1993 Title						_	fitle				JK			
Date	713/783-0376 Telephone No.									· · · · · · · · · · · · · · · · · · ·				

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.