Submit 5 Copies Appropriate District Office <u>DISTRICT 1</u> P.O. Box 1980, Hobbs, NM 88240 <u>DISTRICT II</u> P.O. Drawer DD, Artenia, NM 88210 <u>DISTRICT III</u> 1000 Rio Brazos Rd., Aztec, NM 87410 I.	REQU	OIL CO Santa JEST FOR	State of Ne erals and Nati NSERVA P.O. Bo Fe, New Me ALLOWAE SPORT OIL	DIVISIO 14-2088 AUTHORIZ	See Instructions at Bottom of Page					
Openator XERIC OIL & GAS COMPA	NY						DINO. 141 - 2075	3		
Address					<u></u>			·		
P. O. BOX 51311, Midle Reason(s) for Filing (Check proper box)	and, TX	(	)	- Out	er (Please expla	11/1)				
New Well	Oil	Change in Tra								
Recompletion	Caninghea		ndennate	Effect	ive FEBF	RUARY 1	, 1993			
If change of operator give nameFIN	A OIL	& CHEMIC	AL COMPAN	Y						
II. DESCRIPTION OF WELL	AND LE	ASE								
Lease Name		Well No. Po	ol Name, Includu	•			Lesse		ase No.	
Horton Federal		<u>35 M</u>	ilnesand	San Andr	es			NMNMO	45685	
Unit Letter <u>C</u>	<u>. 990</u>	Fe	et From The NOT	th Lo	and	) Fo	et From The _	West	Line	
Section 30 Township	<b>8</b> 5	Ra	nge 35E	N	MPM.	Roosevel				
						MUSEVE			County	
III. DESIGNATION OF TRAN Name of Authonized Transporter of Oil	SPORTE	or Condensate			e address to wi	rich approved	copy of this for	m is to be set	n/)	
PRIDE PIPELINE CO	MPANY		ليـــ	P.O.	BOX 243	6			I	
Name of Authonized Transporter of Casing Warren Petroleum Compa	-	VX or	Diy Gas		NE, TEX			m is to be set	ni)	
If well produces oil or liquids,	Unit Unit	Sec. Tu	p. Rge	i le gae actuali		When			··	
give location of tanks. If this production is commungled with that I		30 189	the second and here is a second s	Ye						
IV. COMPLETION DATA			, give contenting	ing order pmir					,	
Designate Type of Completion	• M	Oil Well	Gas Well	New Well	Workover	Deepea	Plug Back	Same Res'v	Diff Res'v	
Date Spudded		pl. Ready to Pro	1 x4.	Total Depth	L	L	P.B.T.D.		- <b>L</b>	
Elevauons (DF, RKB, RT, GR, etc.)	Name of P	malucine Form		Top Oil/Gas	Top Oil/Gas Pay					
	Name of Producing Formation						Tubing Depth			
Performions								Depth Casing Shoe		
	TUBING, CASING AND			CEMENTING RECORD						
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET		SACKS CEMENT			
		·····								
V. TEST DATA AND REQUES	T FOR A	LLOWABI	LE				<u> </u>			
OIL WELL (Test must be after re	covery of 10	nal volume of lo						r full 24 hour	s.)	
Date First New Oil Run To Tank	Date of Te	<b>g</b>		Producing Me	schod (Flow, pu	mp, gas lýt, ei	ic.)		!	
Length of Test	Tubing Pressure			Casing Pressure			Choke Size		·····	
Actual Prod. During Test	Qil - Bbls.			Water - Bols			Gas- MCF			
-		W								
GAS WELL	· · · · · · · · · · · · · · · · · · ·	<b>.</b>							•	
Actual Prod. Test - MCF/D	Length of	1 641		Bbis. Condensate/MMCF			Gravity of Co	Gravity of Condensate		
Tesung Method (puol, back pr.)	Tubing Pre	saure (Shui-in)		Casing Press.	ine (Shut-in)		Choke Size			
VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				OIL CONSERVATION Date Approved FEB				DIVISIC 0 2 1993		
	$\rightarrow$	5-15		Date		·				
Signature					By ORIGINAL SENED BY HEREY SEXTON					
Pristed Name Title				BISTRICT 1 SUPPRIVISOR						
<u>1-22-93</u> 9/5-683-2171 Date Telephone No.										
		1 erepnot		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 with Rule 111,

2) All sections of this form must be filled out for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
Separate Form C-104 must be filed for each pool in multiply completed wells.