P. O. BOX 1980 HOBBS, NEW MEXICO 88240 FORM APPROVED			N. M. CH. Land Standard	
SUMDRY NOTICES AND REPORTS ONUMPELICATION In the despension restrip to a differentity of a differentiation of the base of the b	orm j160-5 une 1990)	DEPARTMENT OF	P. O. BOX 1930 TATES HOBBS, NEW MEXICO 88240 THE INTERIOR RECEIVED	Budget Bureau No. 1004-0135 Expires: March 31, 1993 5. Lease Designation and Serial No.
SUBMIT IN TRIPLICATE 1: Type of Weil Get P & A 1: Type of Weil Get P & A 1: Name of Operator Weil Control SI Federal #1 YATES PETROLEUM CORPORATION (505) 748-1471) 3: Advect and Telephone No. 100 50007-20490 10: DOS South Ath St., Artesia, NM 88210 100 Fourth Ath St., Artesia, NM 88210 4: Lection of Weil (Fourge, Sec., T. R. M. or Survey Description) 10. Fourd ath Adv. St. Unit D, 660' FNL & 660' FWL, Sec. 1-T8S-R31E 11. Comptoy of Path, Surt 2: CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION (1) Notice of Intent Abandomerst 0: Subsequent Report Chage of Plan 0: Subsequent Report Chage of Plan 1: Densition function Weil Report Metric 1: Densition and measured and the wethol depth for all matters and rough proposed wet. If well is directionally defined at the start of the start o		rm for proposals to drill or to	o deepen or reentry to a different reservoi	6. If Indian, Allottee or Tribe Name
Construction C		SUBMIT IN TI	RIPLICATE AREA	7. If Unit or CA, Agreement Designation
15 Nume di Operator Uniton SI Federal #1 YATES PETROLEUN CORPORATION (505) 748-1471) 2 Adfweit Ne. 30-005-20490 10 South 4th St., Artesia, NM 88210 10 Hold as Pod, or Exploratory Area 1 Lection of Wall Grage, Sec. T.A., en Survey Description) 10 Hold as Pod, or Exploratory Area 1 Lection of Wall Grage, Sec. T.A., en Survey Description) 11. Commy of Patish, Sawe 2 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION 1 New Construction Description frame 1 Notice of Iosen Proposed or Complete Operations of Mall Pod, Subsequent Report 1 Describe Proposed of Complete Operations (Clarity trat all period draft, ind give periterst date, Including stimated date of taring, any proposed wat. If well is directionally offician 13 Describe Proposed of Complete Operations (Clarity trat all period draft, ind give periterst date, Including stimated date of taring, any proposed wat. If well is directionally offician 13 Describe Proposed of Complete Operation (Clarity trat all period draft, ind give periterst date, Including stimated date of taring, any proposed wat. If well is directionally offician 13 Describe Proposed of Complete Operation Note Other 14 Letter Propose to plug and abandom well as follows: Set CLEP € 3950'. Cap w/ 35'cement. Cut & guil 14-1/2" capsing. Top of cem				8. Wall Name and No.
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i. defers and Telephone No. 30-005-20490 105 South 4th St., Artesia, NM 88210 10. Field and Pool, or Explanatory Area Tomal havk. SA Tomal havk. SA Unit D, 660' FNL & 660' FWL, Sec. 1-T8S-R31E Tomal havk. SA 11. Comp or Parids, Sate Chaves, NM 22. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION 12. Subsequent Report Babacoment 13. Subsequent Report Chaing of Plins. 14. Subsequent Report Chaing Repair 15. Interdent Chaing and the origing Back Non-Rotine Fracturing 15. Describe Proposed or Completion (Chaing and performed data), including estimated data of saming any proposed work. If well is directionally dell greater and completion to higher and the origing Back 13. Describe Proposed or Completion Chaing and performed data, including estimated data of saming any proposed work. If well is directionally dell greater and completion to higher and the origing more and the origing more and the origing more and the origing the origing the origing and proposed work. If well is directionally dell greater and the origing back 15. Describe Proposed to Completion Chaing and makers and zones performed to a saming any proposed work. If well is directionally dell greater and the origing back 16. The point Chain and the state origing the origing the origing the origing the origing the origing back 17. Describe Proposed tor Completin Ch	•	EUM CORPORATION	(505) 748-1471)	
1. Location of Well Frenze, Be., T. R., M., or Surger Description? Tomahawk SA 1. Location of Well Frenze, Be., T. R., M., or Surger Description? Tomahawk SA 10. Contro of Path, Sate Chaves, NM 2. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION 11. Comport of Path, Sate Chaves, NM 2. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION (2) Nonce of Inten Recomptation (3) Subsequent Report Charge of Plans (4) Subsequent Report Recomptation (5) Subsequent Report Charge of Plans (5) Subsequent Report Charge of Plans (6) Subsequent Report Charge of Plans (7) Subsequent Report Recomptation and Instance (7) Subsequent Report Charge of Plans (7) Subsequent Report Non-Rotine Fracturing (5) Subsequent Report Charge of Plans (7) Subsequent Report Charge of Plans (7) Subsequent Report Charge Subsequent Report (7) Subsequent Report Charge Subsequent Report (7) Subsequent Report Charge Subsequent Report	Address and Telephone N	0.	······································	
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Unit D, 660' FNL & 660' FWL, Sec. 1-T8S-R31E Chaves, NM Chaves, NM Check APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION New Construction Subsequent Repon Final Abandonment Notice Disposed ar Completed Operations (Clearly state all perform details, and give perform dates, including estimated date of starting and proposed work. If well is directionally defi give subsurface locations and measured and the vertical depth for all markers and zones perform to this work. ¹⁷ Propose to plug and abandon well as follows: Set CIBP @ 3950'. Cap w/ 35'cement. Cut & pull 4-1/2" casing. Top of cement is approx. 3600' by CBL. Set 130' cement plug across 4-1/2" casing shub. Set 130' cement plug across 4-3/8" casing shub. Set 130' cement plug across 4-3/8" casing shub. Set 130' cement plug across 13-3/8" casing shub. Set 130' cement plug across 13-3/8" casing shue at 315'. Set 50' cement plug across 13-3/8" casing shue at 315'. Set 50' cement plug across 13-3/8" casing shue at 315'. Set 50' cement plug across 4-12" Title Production Clerk Approved by Title Production Clerk Approved by Title Production Clerk Approved by Dispose to file of approval. If any: Title Title Production Clerk Prefer, W. CHERTYER Approved by Dispose to file of the detail of State office use) Approved by Prefer, W. CHERTYER Approved by Dispose to file office use) Approved by Dispose to file office use) Approved by Dispose to file office use) Title Prefer, W. CHERTYER Dispose Prefer, W. CHERTYER Dispose Prefer, W. CHERTYER Dispose Conditions of approval. If any: Dispose Cherty State office use) Conditions of approval. If any: Dispose Title Dispose Dispose Conditions of approval. If any: Dispose Condition	4. Location of Well (Footage	e, Sec., T., R., M., or Survey Description)	· · · · · · · · · · · · · · · · · · ·
Chaves, NM Check APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF SUBMISSION TYPE OF ACTION New Construction Subsequent Report Final Abandonment Noice Describe Proposed or Completed Operations (Charly state all pertinent details, and give pertinent dets, including estimated date of starting smy proposed work. If well is directionally drill give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)* Propose to plug and abandon well as follows: Set CIBP @ 3950'. Cap w/ 35'cement. Cut & pull 4-1/2" casing. Top of cement is approx. 3600' by CBL. Set 130' cement plug across 4-1/2" casing shoe at 3223'. Set 100' cement plug across 13-3/8" casing shoe at 315'. Set 50' cement plug across 13-3/8" casing shoe at 315'. Set 50' cement plug across 13-3/8" casing shoe at 315'. Set 50' cement plug across 13-3/8" casing shoe at 315'. Set 100 cement plug across 13-3/8" casing shoe at 315'. Set 100 cement plug across 4-1/2" casing shoe at 315'. Set 100 cement plug across 4-1/2" casing shoe at 315'. Set 100 cement plug across 4-1/2" casing shoe at 315'. Set 100 cement plug across 4-1/2" casing shoe at 315'. Set 100 cement plug across 4-1/2" casing shoe at 315'. Set 100 cement plug across 4-1/2" casing shoe at 315'. Set 100 cement plug across 4-1/2" casing shoe at 315'. Set 100 cement plug across 4-1/2" casing shoe at 315'. Set 100 cement plug across 4-1/2" casing shoe at 315'. Set 100 cement plug across 4-1/2" casing shoe at 315'. Set 100 cement plug across 4-1/2" casing shoe at 315'. Set 100 cement plug across 4-1/2" casing shoe at 315'. Set 100 cement plug across 4-1/2" casing shoe at 315'. Set 100 cement plug across 4-1/2" casing shoe at 315'. Set 100 cement plug across 4-1/2" casing shoe at 315'. Set 100 cement plug across 4-1/2" casing shoe at 315'. Set 100 cement plug across 4-1/2" casing shoe at 315'. Set 20' cement plug across 4-1/2" casing shoe at 315'. Set 100 cement plug across 4-1/2" casing shoe at 315'.	Unit D,	660' FNL & 660' FWL,	Sec. 1-T8S-R31E	11. County of Parish, State
TYPE OF SUBMISSION TYPE OF ACTION Image: Completed Intent Image: Completed Intent Image: Completed Intent Image: Subsequent Report Image: Completed Intent Image: Completed Intent		,		Chaves, NM
Image: Subsequent Report Image: Subsequent Report Image: Subsequent Report	2. CHECK	APPROPRIATE BOX(s) TO	INDICATE NATURE OF NOTICE, REF	ORT, OR OTHER DATA
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Subsequent Report Recompletion New Construction Proging Back Non-Rowine Fracturing Non-Rowine Fracturing Subsequent Report Conversion to Injection Dispose Water 13. Describe Proposed or Completed Operations (Clearly state all perinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally defile greater to this work.)? 13. Describe Proposed or Completed Operations (Clearly state all perinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally defile greater to this work.)? 13. Describe Proposed or Completed Operations (Clearly state all perinent details, and give perinent dates, including estimated date of starting any proposed work. If well is directionally defile greater to this work.)? 14. Therefore to plug and abandon well as follows: 15. Set 130' cement plug across 4-1/2" casing shoe at 315'. 16. Therefore, certify that the foregoing it fore and correct 17. Install abandonment marker. NOTE: NOTIFY BLM (624-1790) 24 HOURS PRIOR TO COMMENCING PLUGGING OPERATIONS. 14. Thereby certify that the foregoing it fore and correct signed the foderal of Starting Start and correct signed the foderal of Start and correct 14. Thereby certify that the foregoing it fore and correct 15. Set 50 foderal of Start and correct 16. Thereby c	X Notice of	f Intent	X Abandonment	Change of Plans
Image: Signed Additional State of Firety Signed Additional State of Sta	_		Recompletion	New Construction
Image: State of specific provide the foregoing type and correct Altering Casing Conversion to Injection Image: State of provide the foregoing type and correct Discribe Production Clearly state all pertinent details, and give periment date of starting any proposed work. If well is directionally drill give subsurface locations and measured and true vertical depths for all markers and zones periment to this work.)* Propose to plug and abandon well as follows: Set CIBP @ 3950'. Cap w/ 35'cement. Cut & pull 4-1/2" casing. Top of cement is approx. 3600' by CBL. Set 130' cement plug across 4-1/2" casing stub. Set 100' cement plug across 4-3/8" casing shoe at 3223'. Set 100' cement plug across 13-3/8" casing shoe at 315'. Set 50' cement plug at surface. Install abandonment marker. NOTE: NOTIFY BLM (624-1790) 24 HOURS PRIOR TO COMMENCING PLUGGING OPERATIONS. It. Thereby cerify that the foregoing type and correct Signed + Marker office use) Title Production Clerk Approved by Conductor office use) Title Production Clerk Approved by Conductor by Conductor office use) Title Production Clerk Approved by Conductor of approval. if any: Title Production Clerk	Subseque	ent Report	Plugging Back	Non-Routine Fracturing
Other Dispose Water UNce. Report real of onlight completion on We completion of Completed Operations (Clearly state all perinent details, and give perinent dates, including estimated date of starting any proposed work. If well is directionally dril give ubsurface locations and measured and true vertical depths for all markers and zones perinent to this work.)* Propose to plug and abandon well as follows: Set CIBP @ 3950'. Cap w/ 35'cement. Cut & pull 4-1/2" casing. Top of cement is approx. 3600' by CBL. Set 130' cement plug across 4-1/2" casing stub. Set 130' cement plug across 8-5/8" casing shoe at 3223'. Set 100' cement plug across 13-3/8" casing shoe at 315'. Set 50' cement plug at surface. Install abandonment marker. NOTE: NOTIFY BLM (624-1790) 24 HOURS PRIOR TO COMMENCING PLUGGING OPERATIONS. 14. Thereby cerify that the foregoing infore and correct Tride Signed Production Clerk Approved by Conditions of approval. if any: Title				
When: Repartmult of multiple completion and the second to a form of the	Final Ab	bandonment Notice		
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally dril give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)* Propose to plug and abandon well as follows: Set CIBP @ 3950'. Cap w/ 35'cement. Cut & pull 4-1/2" casing. Top of cement is approx. 3600' by CBL. Set 130' cement plug across 4-1/2" casing stub. Set 130' cement plug across 8-5/8" casing shoe at 3223'. Set 100' cement plug at coress 8-5/8" casing shoe at 315'. Set 50' cement plug at surface. Install abandonment marker. NOTE: NOTIFY BLM (624-1790) 24 HOURS PRIOR TO COMMENCING PLUGGING OPERATIONS. 14. I hereby certify that the foregoing is five and correct Signed Title Production Clerk PETER W. CHESTER Approved by Title Conditions of approval, if any: Title			└ Other	
Signed Mathematical State Title Production Clerk Approved by (This space for Federal of State office use) Title Title Date Approved by Title JUL 2 2 1994	Set CIB Cut & p Set 130 Set 130 Set 100 Set 50' Install	P @ 3950'. Cap w/ 35 ull 4-1/2" casing. To ' cement plug across ' cement plug across ' cement plug across cement plug at surfac abandonment marker.	'cement. op of cement is approx. 3600' by 4-1/2" casing stub. 3-5/8" casing shoe at 3223'. 13-3/8" casing shoe at 315'. ce.	
Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or again the United States and half of the United States and half of the United States and half of the United States and the Unite	Signed <u>Kustu</u> (This space for Federal Approved by Conditions of approval,	State office use)	Title	$\frac{1}{1} \frac{1}{R} \frac{W_{E}}{W_{E}} \frac{1}{2} \frac{1}{2} \frac{1}{1} \frac{1}{2} \frac{1}$
	Title 18 U.S.C. Section 100	01, makes it a crime for any person knowin	gly and willfully to make to any department or agen ROB incl.	Inted States Any false fictitious of fraudulent staten
			*See Instruction on Reverse Side	

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– abmit 5 Copies ppropriate District Office ISTRICT I	Energy, Mi	State of New inerals and Natura	/ Mexico al Resources Department	:	Form C-104 Revised 1-1-89 See Instructions	
5. Box_1980, Hobbs, NM 88240	OILCO		TION DIVISION		at Bottom of Page	
). Drawer DD, Artesia, NM 88210	San	P.O. Box ta Fe. New Mex	ico 87504-2088			
<u>STRICT III</u> 20 Rio Brazos Rd., Aztec, NM 87410		-				
			E AND AUTHORIZA	5	·	
perator			<u> </u>	Well AP	1 No. 05–20490	
YATES PETROLEUM CORPO	ORATION	·	· · · · · ·			
105 South 4th St., An	rtesia, NM 8	8210	Other (Please explain	·····		
eason(s) for Filing (Check proper box)	Change in 7	Transporter of:	EFFECTIVE NOV		. 1993 - OIL	
tecompletion	Oil XX Casinghead Gas XX	Dry Gas	EFFECTIVE JUL	Y 1, 19	93 – GAS	
hange in Operator	Casingnead Gas AA					
address of previous operator		<u> </u>				
. DESCRIPTION OF WELL A	Well No.	Pool Name, Including		Kind of State F	Lease Lease No. ederal of Fee/ NM-0558018	
Union SI Federal		Tomahawk S		444.	MI-0558018	
Unit Letter D	660	Feet From The <u>No</u>	orth Line and 660.	Fee	tFrom The West Line	
1	8S	Range 31E	, NMPM,	Chave	S County	
	· · · · · · · · · · · · · · · · · · ·					
II. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	SPORTER OF O	IL AND NATUR	Address (Give address to whit	ch approved	copy of this form is to be sent)	
Scurlock-Permian Corp	oration		PO Box 4648, Hou		CX 77210-4648 copy of this form is to be sent)	
Name of Authorized Transporter of Casing Warren Petroleum Corp	ghead Gas [X] oration	or Dry Gas	PO Box 1589, Tul	Lsa, OK	74101	
If well produces oil or liquids,	Unit Sec.		Is gas actually connected?	When	? 3–20–83	
tive location of tanks. f this production is commingled with that	from any other lease or	8 31 pool, give commingli	Yes	J		
V. COMPLETION DATA			New Well Workover	Deepen	Plug Back Same Res'v Diff Res'v	
Designate Type of Completion	- (X)	Gas Well		Deepeu		
Date Spudded	Date Compl. Ready to	o Prod.	Total Depth		P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing F	ormation	Top Oil/Gas Pay		Tubing Depth	
Perforations			<u> </u>		Depth Casing Shoe	
		, CASING AND UBING SIZE	CEMENTING RECOR DEPTH SET	<u>D</u>	SACKS CEMENT	
HOLE SIZE						
				<u> </u>		
V. TEST DATA AND REQUE OIL WELL (Test must be after	ST FOR ALLOW	ABLE e of load oil and musi	t be equal to or exceed top allo	owable for thi	is depth or be for full 24 hours.)	
Date First New Oil Run To Tank	Date of Test		Producing Method (Flow, pr	ump, gas lift,	elc.)	
Length of Test	Tubing Pressure		Casing Pressure		Choke Size	
			Water - Bbls.		Gas- MCF	
Actual Prod. During Test	Oil - Bbls.		Water Dold			
GAS WELL	<u> </u>					
Actual Prod. Test - MCF/D	Length of Test		Bbls. Condensate/MMCF		Gravity of Condensate	
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)		Choke Size	
			-			
VI. OPERATOR CERTIFI	zulations of the Oil Con-	servation	OIL COI		ATION DIVISION	
Division have been complied with an is true and complete to the best of m	nd that the information g	ziven above	Data Anara	h	OCT 27 1993	
()			Date Approve			
Acanita De	odlett		By ORIGINA	L SIGNED		
Juanita Goodlett -	Production S	uporvicor			SUPERVISOR	
		Title	Title			
Printed Name 10-25-93	505/74	Title 8-1471 Felephone No.	Title			

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104
 Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
 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.

nult 5 Coples propriute District Office TINICT 1	State of Ne Energy, Minerals and Natu		UP CELLE A 206 TURNING		
. Box 1980, Hobbs, NM 88240 T <u>RICT 11</u> . Drawer DD, Artesia, NM 88210	OIL CONSERVA' P.O. Bo	x 2088	OCT 1 8 1	at Bottom of Page OCT 1 8 1991	
TRICE III	Santa Fe, New Me	xico 87504-2088	O. C. D		
J Rio Brazos Rd., Aztec, NM 87410	REQUEST FOR ALLOWAB TO TRANSPORT OIL				
YATES PETROLEUM CO			Well API No. 30-005-20490		
frees			150-005-20450		
105 South 4th St.,	Artesia, NM 88210	Other (l'lease explain)			
w Well	Change in Transporter of:				
completion	Oil Dry Gas	EFFECTIVE AUGU	JST 30, 1991	٨	
ange in Operator [_]	Casinghead Gas 🕅 Condensate				
address of previous operator					
DESCRIPTION OF WELL		na Romation	Kind of Lease	Lease No.	
ase Name Jnion SI Federal	Well No. Pool Name, Includin 1 Tomahawk		State/ Federal or/Tiky	NM 0558018	
cation		orth	n . n m . Ti	leet 14	
Unit Letter D	: <u>660</u> Feet From The <u>N</u>	orth Line and 660	Feet From The	lest lin	
Section 1 Townshi	19 8S Range 31	E NMPM, C	naves	County	
DESIGNATION OF TRAN	SPORTER OF OIL AND NATU	RAL GAS			
ame of Authorized Transporter of Oil	or Condensale	Address (Give address to which			
Enron Oil Trading & Tr		P.O. Box 1188, How Address (Give address to which			
ame of Authorized Transporter of Casin Trident NGL, Inc.	Elicente 1-1-33	PO Box 50250, Mi			
well produces oil or liquids, e location of tanks.	Unit Sec. Twp. Rge. D 1 8 31	is gas actually connected? Yes	When 7 3-20-83		
	from any other lease or pool, give comming	ling order number:			
. COMPLETION DATA	Oil Well Gas Well	New Well Workover	Deepen Plug Back	Same Res'v Diff Res's	
Designate Type of Completion		I New Well WORKOVEL			
ute Spunded	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 Dept	·····	
(cysuons (Dr., KKD, KI, OK, SIC.)	Itanic of Floriding Formation				
erforations			Depth Casing	Shoe	
	TUBING, CASING AND	CEMENTING RECORD			
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	S	ACKS CEMENT	
. TEST DATA AND REQUE IL WELL (Fest must be after	EST FOR ALLOWABLE r recovery of total volume of load oil and mu	us be equal to or exceed top allow	able for this depth or be f	or full 24 hours.)	
Date First New Oil Run To Tank	Date of 'l'est	Producing Method (Flow, pury	o, gas lýt, etc.)		
		Casing Pressure	Choke Size		
Length of Test	Tubing Pressure				
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF		
GAS WELL			I		
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Giavity of C	Condensate	
	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size	Choke Size	
Fosting Method (pilol, buck pr.)	inding therease (2000-10)	Casing t tosserie fortat.ml	Contrast Marke		
VI. OPERATOR CERTIF	ICATE OF COMPLIANCE				
I hereby certify that the rules and re-	gulations of the Oil Conservation		SERVATION		
Division have been complied with a is true and complete to the best of n	ind that the information given above ny knowledge and belief.	Date Approved	J 21 Z		
·		11			
\frown · · · ·			IGNED BY JERRY S	EXTON	
Juanita Loo		By ORIGINAL	NOT I FLIPPALNOA		
Signature YuanIta Goodlett	- Production Supvr.	DIST	RICT I SUPERVISOR		
Signature Suanita Goodlett Printed Name 10-17-91		DIST	MCT I SUPERVISOR		

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