Submit 3 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Artonia, NM 88210

## محلفات والأخارة المال المثلثات Energy, Minerals and Natural Resources Department.

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

OLL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Petroleum Development	Corpor	ation					1	API NO.	
Address	COLPOL	ation					30-	-005-20514	<del></del>
9720-B Candaleria NE, A	lbuque	rque,	New M	exico (	87112				
Reason(s) for Filing (Check proper box)						es (Please espia	in)		
New Well		Change in			_				
Recompletion	Oil		Dry Ga						
Change in Operator   If change of operator give name   Von	Casinghe		Conden		- <del></del>			·····	
and address of previous operator Ker	r-McGe	e Corp	orati	on, P.	O. Box	11050, Mi	dland,	Texas 797	02
II. DESCRIPTION OF WELL	AND LE	ASE							•
Lease Name		Well No.	Pool Na	me, Includ	ing Formation		Kind	of Lease	Lease No.
Hahn Federal		3			(San Andi	res)	1 .	Federal molEen	15677
Location								<del></del>	
Unit LetterI	- : <u>_</u>	1980	Feet Fro	om The S	outh Lin	and 660	Fe	et From The	East Line
Section 27 Township	. 7	S	_	3	lE NO	C	haves		
Section Township	, ,		Range		, N	MPM, C	naves		County
III. DESIGNATION OF TRAN	SPORTE	ER OF O	IL AN	D NATU	RAL GAS	•			
Name of Authorized Transporter of Oil	1727	or Conde			Address (Giv	e address to whi	ch approved	copy of this form	is to be sent)
Lantern Petroleum Com	<u> </u>			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			nd, Texas	
Name of Authorized Transporter of Casing Trident NGL, Inc.	thead Gas	X	or Dry	Gas	Address (Giv	e address to whi	ch approved	copy of this form and, Texas	is to be sent)
If well produces oil or liquids,	Unit	Sec.	Twp	Pag	Is gas actually		When		79710
give location of tanks.	N	27	7S	31E	Yes		   wien	11/79	
If this production is commingled with that f	rom any ou	her lease or	pool, giv	comming	ing order numl	ber:	<del></del>		<del></del>
IV. COMPLETION DATA		·			γ				
Designate Type of Completion	- (X)	Oil Well	0	ias Well	New Well	Workover	Deepen	Plug Back Sa	me Res'v Diff Res'v
Date Spudded	· · · · · · · · · · · · · · · · · · ·	pl. Ready to	Prod	·	Total Depth	<u> </u>			<u> </u>
		.p.,	71104		long Depar			P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth		
	ĺ							B	
<del></del>	<u> </u>							1	
Perforations	l							Depth Casing S	hoe
Perforations	·	715016	G 1 5 12					Depth Casing S	hoe
Perforations  HOLE SIZE					CEMENTI	NG RECORL	)		
Perforations HOLE SIZE		TUBING, ISING & TU			CEMENTI	NG RECORI DEPTH SET	)		CKS CEMENT
					CEMENTI	·	)		
					CEMENTI	·	)		
HOLE SIZE	CA	ISING & TI	JBING S		CEMENTI	·	)		
HOLE SIZE  V. TEST DATA AND REQUES	T FOR A	ALLOW	JBING S	IZE		DEPTH SET		SAC	CKS CEMENT
HOLE SIZE  V. TEST DATA AND REQUES  OIL WELL (Test must be after re	T FOR A	ALLOW	JBING S	IZE	be equal to or	DEPTH SET	wable for this	SAC	CKS CEMENT
HOLE SIZE  V. TEST DATA AND REQUES	T FOR A	ALLOW	JBING S	IZE	be equal to or	DEPTH SET	wable for this	SAC	CKS CEMENT
HOLE SIZE  V. TEST DATA AND REQUES  OIL WELL (Test must be after re	T FOR A	ALLOW	JBING S	IZE	be equal to or Producing Me	exceed top allow	wable for this	SAC	CKS CEMENT
HOLE SIZE  V. TEST DATA AND REQUES  OIL WELL (Test must be after re  Date First New Oil Run To Tank	T FOR A	ALLOW	JBING S	IZE	be equal to or	exceed top allow	wable for this	SAC s depth or be for j	CKS CEMENT
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HOLE SIZE  V. TEST DATA AND REQUES  OIL WELL (Test must be after re Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCF/D	T FOR A covery of to Date of Te Tubing Pre Oil - Bbls.	ALLOW otal volume	ABLE of load o	IZE	be equal to or Producing Me Casing Pressu Water - Bbls. Bbls. Conden	exceed top allow whod (Flow, pure	wable for this	SAC  st depth or be for julc.)  Choke Size  Gas- MCF  Gravity of Cond	CKS CEMENT  full 24 hours.)
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HOLE SIZE  V. TEST DATA AND REQUES OIL WELL (Test must be after re Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCF/D  Testing Method (puot, back pr.)  VI. OPERATOR CERTIFICA	T FOR A scovery of to Date of Te Tubing Pre Oil - Bbls. Length of Tubing Pre	ALLOW otal volume and resture  Test  COMP	ABLE of load o	il and must	be equal to or Producing Me Casing Pressu Water - Bbls. Bbls. Conden	exceed top allow thod (Flow, pure tre	vable for thi φ, gas lift, e	SAC  depth or be for july.  Choke Size  Gravity of Cond Choke Size	full 24 hows.)
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HOLE SIZE  V. TEST DATA AND REQUES OIL WELL (Test must be after re Date First New Oil Run To Tank  Length of Test  Actual Prod. During Test  GAS WELL  Actual Prod. Test - MCF/D  Testing Method (pitot, back pr.)  VI. OPERATOR CERTIFICA  I hereby certify that the rules and regulat Division have been compiled with and the is true and complete to the best of my in  Signature  Signature  Actual Prod. Test - MCF/D	TFOR A secovery of to Date of Te Tubing Pre	ALLOW otal volume est resture  Test resture (Shut CONIP oil Conser remailion give and belief.	ABLE of load o	il and must	be equal to or Producing Me Casing Pressu Water - Bbls.  Bbls. Conden Casing Pressu Date By	exceed top allow thod (Flow, pure tree (Shut-in)	SERV	choke Size  Gravity of Cond  Choke Size  Gravity of Cond  Choke Size	full 24 hows.)
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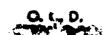
INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 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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