ubmit 5 Copies ppropriate District Office <u>ISTRICT 1</u> 0. Row 1980 Michae Nuclease (c)		Enersy,	, Mineral	s and Na	lew Mexico tural Resources Department		Form C-104 Revised 1-1-89	
O. Box 1980, 1kbbs, NM 88240		OIL	CONS		<b>ATION DIVISION</b>		See Instructions at Bottom of Pag	
D. Drawer DD, Anesia, NM 88210 STRICT III		5	Santa Fe		ox 2088 Jexico 87504-2088			
00 Rio Brazos Rd., Aztec, NM 87410	REQ	UEST	FOR AL		BLE AND AUTHORIZAT			
perator	. <u> </u>	TO TF	ANSP	DRT OII	AND NATURAL GAS	Well API No.		
Jalapeno Corporation Idress Po Box 2607 500 N. Main, Suite 501 Roswell, NM 88201					30-005-2 <del>0962</del> 20926			
ason(s) for Filing (Check proper box)		.11, NI	M 8820	I 	Other (Please explain)			
sw Well	Oil		in Transpo					
hange in Operator		ad Gas [	_] Dry Ga		Effective 9/	10/93	·	
change of operator give name d address of previous operator Ya	ites Ene	rgy Co	orpora	tion F	2.0. Box 2323, Roswe	11, NM 8820	02	
DESCRIPTION OF WELL	_ AND LE		·····				· · · · · · · · · · · · · · · · · · ·	
outh Tomahawk Federal	-	Well No	Description Pool N Tom/	ame, Includi ahawk (	ing Formation (San Andres)	Kind of Lease State, Federal or Fe	Lease No.	
xation		-L	· • _4			State, rederat or re	• NM-0347394	
Unit Letter E	_:1	980	Fect Fr	om The	lorth_Line and330	Feet From The	West	
Section 6 Towns	hip 8S		Range	32E				
DESIGNATION OF TRA	NSPORTI	ER OF	()]] A N	[] ] ]	and the second descent in the second se	·····	County	
		or Cond	lensate		Address (Give address to which a	pproved conv of this	form is to be send	
me of Authorized Transporter of Casi	ansporation	tion			P.0. Box 1188 Hous	ton TX 7725	51-1188	
		<u> </u>	or Dry		Address (Give address to which a	pproved copy of this j	(orm is to be sent)	
well produces oil or liquids, e location of tanks.	Unit	Sec.	] Twp.		Is gas actually connected?	When ?		
his production is commingled with the COMPLETION DATA	E If from any of	her lease of	0r pool, giv	32E	ing order number:	l		
. COMPLETION DATA								
Designate Type of Completion	n - (X)	Oil W	ell   (	Gas Well	New Well Workover D	cepen Plug Back	Same Res'v Diff Res	
ue Spudded	Date Com	ipl. Ready	lo Prod.		Total Depth	P.B.T.D.	<u> </u>	
evations (DF, RKB, RT, GR, etc.)	Name of I	Producing	Formation		Top Oil/Gas Pay	1.0.1.0.		
Valuons (DF, RKB, RT, GR, etc.) Name of Producing Formation				rop Old Cas Pay	Tubing Dep	sh		
						Depth Casi	ng Shoe	
		TUBIN(	J, CASII	VG AND	CEMENTING RECORD			
HOLE SIZE	HOLE SIZE CASING & TUBING SIZE			SIZE	DEPTH SET		SACKS CEMENT	
TEST DATA AND REQUE	ST FOR	ALIAN	VADEE					
LWELL (Test must be after	Tecovery of 1	otal volun	vaner. Ne of load i	il and must	be equal to or exceed top allowabl	e for this doubt on h		
ite Fina New Oil Run To Tank	Date of Te	est.			Producing Method (Flow, pump, g	as lift, etc.)	jor juli 24 hours.)	
ingth of Test	Tubing Pr	essure			Casing Pressure	Choke Size		
tual Prod. During Test		01.00				Choke Size	Gas- MCF	
	Oil - Bbis.				Water - Bbls.	Gas- MCF		
AS WELL					1			
ciual Prod. Test - MCF/D	Length of	Test	<u> </u>		Bbis. Condensate/MMCF	Gravity of	Condensate	
	Tubing Pr	Tubing Pressure (Shut-in)			Casing Pressure (Shul-in)	Choke Size		
sting Method (pitot, back pr.)				alt.		ERVATION		
sting Method (pilot, back pr.) I. OPERATOR CERTIFIC I hereby certify that the rules and rep	ulations of the						DIVISION	
sting Method (pilot, back pr.) I. OPERATOR CERTIFIC I hereby certify that the rules and reg Division have been complied with an	ulations of the	e Oil Cons	servation					
sting Mathod (pitot, back pr.) I. OPERATOR CERTIFIC I hereby certify that the rules and reg Division have been complied with an is true and complete to the best of my	ulations of the d that the info y knowledge a	e Oil Cons	servation					
sting Mathod (pitot, back pr.) I. OPERATOR CERTIFIC I hereby certify that the rules and reg Division have been complied with an	ulations of the d that the info y knowledge a	e Oil Cons ormation g and belief.	servation given above		Date Approved	NFC 301	993	
I. OPERATOR CERTIFIC I hereby certify that the rules and reg Division have been complied with an is true and complete to the best of my <u>Scantta</u> Atk Signature Jeanetta Atkinson	ulations of the d that the info y knowledge a	e Oil Cons ormation g and belief.	servation given above		Date Approved	IFC 30 1	993	
sting Method (pitot, back pr.) I. OPERATOR CERTIFIC I hereby certify that the rules and reg Division have been complied with an is true and complete to the best of my <u>Scanctla</u> <u>Ath</u>	ulations of the d that the info y knowledge a	e Oil Cons ormation g and belief. Jala	servation given above	 retary	Date Approved	NFC 301	993	

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 associated wells.