STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

(Dase)

#8. 00 COPIGE 888			
DISTRIBUTION			
BANTA FE			
FILE			
V.8.G.8.			
LAND OFFICE			
TAANSPORTER	OIL		
	BAS		
UPERATOR			
PROBATION OFFICE			

OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

Form C-104 Revised 10-01-78 Format 06-01-83 Page 1

Separate Forms C-104 must be filed for each pool in multiply completed wells.

REQUEST FOR ALLOWABLE

Coperation Varies Drilling Company		AND
Vares Drilling Company 207 South 4th Street Artesia, N.M., 88210 Recon(s) for filing (Cace proper box) Change in Transporter et:	AUTHORIZATION TO TRANS	SPORT OIL AND NATURAL GAS
New Well Change in Current Change in Transporter of:	Operator	
New Well Change in Current Change in Transporter of:	Yates Drilling Company	
Resconds for filing (Check proper box) New Well New Well Change in Transporter of: Dry Gas Change in Other (Please esplan) Change in Other (Please of Chan		
New Well	207 South 4th Street, Artesia, N.M. 882	210
Clange in Ownership Castinghead Gas Condensate Co		
Clange in Ownership Casinghead Gas Condensate Con	[{~~]	Additional to the second property of the second state of the secon
If change of ownership give name and address of previous owner. III. DESCRIPTION OF WELL AND LEASE Lease Name Garner Federal 6 Caprock Queen Man State State, Sederal or Fee Federal NM-015807 Lecetion Unit Letter E: 2310 Feet From The North Line and 660 Feet From The West Line of Section 3 Township 13S Ronge 31E NNPM, Chaves County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorised Transporter of Oil & or Condensate Address (Give address to which approved copy of this form is to be sent) Name of Authorised Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) If well produces all or liquids, Unit Sec. Twp. Res. If well produces all or liquids, Unit Sec. Twp. Res. If this production is commingted with that from any other lease or pool, give commingling order number: NOTE: Camplete Parts IV and V on reverse side if necessary. VI. CERTIFICATE OF COMPLIANCE In this production is commingted with that from any other lease or pool, give commingling order number: NOTE: Complete Parts IV and V on reverse side if necessary. VI. CERTIFICATE OF COMPLIANCE In this production is commingted with that from any other lease or pool, give commingling order number: NOTE: Complete Parts IV and V on reverse side if necessary. VI. CERTIFICATE OF COMPLIANCE In this production is commingted with sand that the information given is true and complete to the best of my knowledge and belief. This form is to be filled in compliance with Rule 1104.	The completion of the control of the	Minorale Many spannout Sarvice
II. DESCRIPTION OF WELL AND LEASE Lecese Name Garner Federal General General General General General Graptork Queen General	Change in Ownership	33.11.01.01.01
Lease Name Lease Name	If change of ownership give name	
Garner Federal Address (Gure address to which approved copy of this form is to be sent) P. O. Box 159. Artesia, N.M. 88210 Address (Gure address to which approved copy of this form is to be sent) P. O.	and address of previous owner	
Garner Federal Address (Gure address to which approved copy of this form is to be sent) P. O. Box 159. Artesia, N.M. 88210 Address (Gure address to which approved copy of this form is to be sent) P. O.	II DESCRIPTION OF WELL AND LEASE	
Garner Federal 6 Caprock Queen Federal Not Not North Line and 660 Feel From The West Line of Section 3 Township 13S Range 31E NispM, Chaves County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent) Navajo Refining Company P.O. Box 159. Attesia. N. 88210 Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) If well produces oil or liquids, Unit Sec. Twp. Rqs. Is que actually connected? When If well produces oil or liquids, Unit Sec. Twp. Rqs. Is que actually connected? When If this production is commingled with that from any other lease or pool, give commingling order number: NOTE: Complete Parts IV and V on reverse side if necessary. VI. CERTIFICATE OF COMPLIANCE OIL CONSERVATION DIVISION NOV = 7 1984 19 APPROVED NOV = 7 1984 19 TITLE This form is to be filled in compliance with Rule 1104.	Lease Name Well No. Pool Plane, including	Formation Kind of Lease No.
Unit Letter E: 2310 Feet From The North Line and 660 Feet From The West Line of Section 3 Township 13S Range 31E , NMPM, Chaves County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent) Navajo Refining Company		Mad Utili Rate, Federal or Fee Federal NM-015807
Line of Section 3 Township 13S Range 31E , NMPM, Chaves County III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be sent) Navajo Refining Company Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) If well produces oil or liquids, Unit Sec. Twp. Rgs. Is gas actually connected? When If well produces oil or liquids, E 3 13S 31E If this production is commingled with that from any other lease or pool, give commingling order number: NOTE: Complete Parts IV and V on reverse side if necessary. VI. 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 is true and complete to the best of my knowledge and belief. This form is to be filed in compliance with RULE 1104.	Location	,
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Cil	Unit Letter E : 2310 Feet From The North L	ine and 660 Feet From The West
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Cil	Davis Davis	OLD NADA Charage County
Navajo Refining Company Name of Authorized Transporter of Cli Company Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) If well produces oil or liquids, cive location of tanks. If this production is commingled with that from kny other lease or pool, give commingling order number: NOTE: Complete Parts IV and V on reverse side if necessary. VI. 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 is true and complete to the best of my knowledge and belief. This form is to be filed in compliance with RULE 1104.	Line of Section 3 Township 13S Range	31E , North, Chaves
Navajo Refining Company Name of Authorized Transporter of Cli Company Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) If well produces oil or liquids, cive location of tanks. If this production is commingled with that from kny other lease or pool, give commingling order number: NOTE: Complete Parts IV and V on reverse side if necessary. VI. 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 is true and complete to the best of my knowledge and belief. This form is to be filed in compliance with RULE 1104.	III DESIGNATION OF TRANSPORTER OF OU AND NATURA	AL GAS
Navajo Refining Company Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent) If well produces oil or liquids, cive location of tanks. If this production is commingled with that from any other lease or pool, give commingling order number: NOTE: Complete Parts IV and V on reverse side if necessary. VI. 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 is true and complete to the best of my knowledge and belief. P.O. Box 159, Artesia, N.M. 88210 Address (Give address to which approved copy of this form is to be sent) Address (Give address to which approved copy of this form is to be sent) Address (Give address to which approved copy of this form is to be sent) When Unit Sec. Twp. Rqe. Is quas actually connected? When OIL CONSERVATION DIVISION APPROVED NOV ~ 7 1984 TITLE This form is to be filed in compliance with RULE 1104.	Name of Authorized Transporter of Cit Condensate C	Address (Give address to which approved copy of this form is to be sent)
Name of Authorized Transporter of Casinghead Gas of Dry Gas Address (Give address to united approved top) of this form is to be filed in compliance with RULE 1104.	Navaio Refining Company	P.O. Box 159, Artesia, N.M. 88210
If well produces oil or liquids, cive location of tanks. E 3 13S 31E If this production is commingled with that from any other lease or pool, give commingling order number: NOTE: Complete Parts IV and V on reverse side if necessary. VI. 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 is true and complete to the best of my knowledge and belief. DIL CONSERVATION DIVISION APPROVED NOV - 7 1984 TITLE This form is to be filed in compliance with RULE 1104.	Name of Authorized Transporter of Casinghead Gas or Dry Gas	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, cive location of tanks. E 3 13S 31E If this production is commingled with that from any other lease or pool, give commingling order number: NOTE: Complete Parts IV and V on reverse side if necessary. VI. 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 is true and complete to the best of my knowledge and belief. DIL CONSERVATION DIVISION APPROVED NOV - 7 1984 TITLE This form is to be filed in compliance with RULE 1104.		Ul
NOTE: Complete Parts IV and V on reverse side if necessary. VI. 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 is true and complete to the best of my knowledge and belief. This form is to be filed in compliance with RULE 1104.	If well produces oil or liquids,	is gas actually connected?
NOTE: Complete Parts IV and V on reverse side if necessary. VI. 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 is true and complete to the best of my knowledge and belief. DIL CONSERVATION DIVISION APPROVED NOV - 7 1984 TITLE This form is to be filed in compliance with RULE 1104.	The state of the s	
VI. 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 is true and complete to the best of my knowledge and belief. OIL CONSERVATION DIVISION APPROVED NOV = 7 1984 TITLE This form is to be filed in compliance with RULE 1104.	If this production is commingled with that from any other lease or pool	give commingling order number:
VI. 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 is true and complete to the best of my knowledge and belief. OIL CONSERVATION DIVISION APPROVED NOV = 7 1984 TITLE This form is to be filed in compliance with RULE 1104.	NOTE: Complete Parts IV and V on reverse side if necessary.	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief. APPROVED NOV = 7 1984 TITLE This form is to be filed in compliance with RULE 1104.	and the second s	OIL CONCEDIVATION DIVICION
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief. TITLE This form is to be filed in compliance with RULE 1104.	VI. CERTIFICATE OF COMPLIANCE	No. 1 April 2 April 2
been complied with and that the information given is true and complete to the best of my knowledge and belief. BY	I hereby certify that the rules and regulations of the Oil Conservation Division have	APPROVED, 19,
TITLE	been complied with and that the information given is true and complete to the best of	
This form is to be filed in compliance with RULE 1104.	my knowledge and belief.	BY
		TITLE
		This form is to be filed in compliance with RULE 1104.
If this is a request for allowable for a newly drilled or deepened	Karen J. Cushman	If this is a request for allowable for a newly drilled or deepened
(Signature) well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with MULE 151.		well, this form must be accompanied by a tabulation of the deviation
Production Clerk All sections of this form must be filled out completely for allow-	المراقع ا	14
able on new and recompleted wells.	• •	able on new and recompleted wells.
11/5/84 Fill out only Sections I, II, and VI for changes of owner, well name or number, or transporter, or other such change of condition.		Fill out only Sections I. II. III, and VI for changes of owner, well name or number, or transporter or other such change of condition.

	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Resty. Diff. Rest	
Designate Type of Comple	tion – (X) X	x		
ate Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
10-6-84	10-31-84	2850'	2830'	
levelions (DF, RKB, RT, GR, etc.	; Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
4158 GL	Queen	2703'	2641'	
erforations			Depth Casing Shoe	
2691'-2703'			2848.77'	
	TUBING, CASING, A	ND CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	
12 1/4"	8 5/8"	385'	250 sxs.	
7 7/8"	5 1/2"	2848.77'	250 sxs.	
		1	i	
TEST DATA AND REQUES	ST FOR ALLOWABLE (Test must be able for this	after recovery of total volume of load depth or be for full 24 hours)	ott and must be equal to or exceed top allo	
OIL WELL	ST FOR ALLOWABLE (Test must be able for this)	after recovery of total volume of load depth or be for full 24 hours) Producing Method (Flow, pump, gas	oll and must be equal to or exceed top allo	
OIL WELL ate First New Oil Run To Tanks	Date of Test	Producing Method (Flow, pump, gas		
OIL WELL ate First New Oil Run To Tanks 10-20-84	apte jur trite	septit of ge for full 24 hower		
OIL WELL sie First New Oil Run To Tanks 10-20-84 ength of Teet	Date of Test 10/31/84	Producing Method (Flow, pump, gas	Choke Size	
OIL WELL ate First New Oil Run To Tanks 10-20-84 ength of Test 24 hrs.	Date of Test 10/31/84 Tubing Pressure	Producing Method (Flow, pump, gas Flow Casing Pressure	Choke Size	
OIL WELL ate First New Oil Run To Tanks 10-20-84 ength of Test 24 hrs. ctual Prod. During Test	Date of Test 10/31/84 Tubing Pressure 100#	Producing Method (Flow, pump, gas Flow Casing Pressure	Choke Size	
OIL WELL ate First New Oil Run To Tanks 10-20-84 ength of Test	Date of Test 10/31/84 Tubing Pressure 100# Oil-Bbis.	Producing Method (Flow, pump, gas Flow Casing Pressure 175# Water-Bhis.	Choke Size 1/2" Gas-MCF	
OIL WELL ate First New Oil Run To Tanks 10-20-84 ength of Test 24 hrs. ctual Prod. During Test 58	Date of Test 10/31/84 Tubing Pressure 100# Oil-Bbis.	Producing Method (Flow, pump, gas Flow Casing Pressure 175# Water-Bhis.	Choke Size 1/2" Gas-MCF	
OIL WELL sie First New Oil Run To Tanks 10-20-84 ength of Teet 24 hrs. ctual Prod. During Test	Date of Test 10/31/84 Tubing Pressure 100# Oil-Bbis.	Producing Method (Flow, pump, gas Flow Casing Pressure 175# Water-Bhis.	Choke Size 1/2" Gas-MCF	
OIL WELL sie First New Oil Run To Tanks 10-20-84 ength of Test 24 hrs. ciual Prod. During Test 58 AS WELL	Date of Test 10/31/84 Tubing Pressure 100# Oil-Bbis. 58	Producing Method (Flow, pump, gas Flow Casing Pressure 175# Water-Bhis. 0	Choke Size 1/2" Gas-MCF 304	

ARTESIA FISHING TOOL COMPANY

P O. BOXXX PHONE (505) 746-6651 470

ARTESIA, NEW MEXICO 88210

Yates Drilling Company 207 South Fourth Street Artesia, NM 88210

> Garner Federal #6 Re: 2310' FNL & 660' FWL Sec. 3, T13S, R31E

Chaves County, New Mexico

Gentlemen:

The following is a Deviation Survey for the above captioned well.

DEPTH	DEVIATION
388'	1/2°
1005'	3/4°
1555'	3/4°
2019'	1°
2516'	1/4°
2850 '	3/4°

Very truly yours,

B. N. Muncy Jr.

Secretary

BNM/rlg

STATE OF NEW MEXICO COUNTY OF EDDY

The foregoing was acknowledged before me this 19th day of October, 1984.

> NOTARY PUBLIC

OFFICIAL SEAL

Signoture: REGINIA L. GARNER

MOTARY PUBLIC - NEW MEXICO NOTARY BOND FILED WITH SECRETARY OF STATE MY Commission Expires Sect. 15,1988