Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico _____nergy, Minerals and Natural Resources Depa_____nt

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

OIL CONSERVATION DIVISION

P.O. Box 2088

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

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

Santa Fe, New Mexico 87504-2088

1000 Rio Brazos Rd., Aztec, NM 87410 I.						AUTHORI TURAL G					
Operator	٨٨	A	.~				Well	API No.			
Address	7 11.1	AKRS	· ,	FUC.					-		
IIIO N.	Bis	Spri.	/1 <u>5</u>	Mid	litil	Texts	79	701			
Reason(s) for Filing (Check proper box)			<i>T</i>		Out	et (Please expl	lain)				
New Well	Oil	Change in	Dry Ga								
Recompletion	Casinghea	d Gas	Conden								
If change of operator give name	<u>-</u>	-	_		D. Cox	1757	forme	11 1/2	& Mayici	6820	
and address of previous operator 100		7	M	1 %	<i></i>	1.51	10,00	/	V 11 (12 par C)	<u> </u>	
II. DESCRIPTION OF WELL	AND LEA		Pool N	ame Includi	ing Formation		Kind	of Lease	L	ease No.	
Location Shults		ی	1	المار	_			Federal or Fe			
Unit Letter	_:	igo	Feet Fr	rom The	<u> </u>	e and Lile	EC F	eet From The	EAS-	<u> Line</u>	
Section 13 Townsh	ip /2	-5	Range	37	-E, N	MPM,		·		County	
III. DESIGNATION OF TRAI	NSPORTE			D NATU	RAL GAS		7. 1		is do be a		
Name of Authorized Transporter of Oil or Condensate					Address (Give address to which approved copy of this form is to be sent)					7417E	
Name of Authorized Transporter, of Casin		(2)	or Dry	Gas 🗍	Address (Giv	ve address to w	hich approved	copy of this j		ent)	
WARREN PETRO		Supl			10.3	158	9 7	ISA_	OKIA	14/02	
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge.	Is gas actuali	y connected?	When	?			
give location of tanks. If this production is commingled with that		13 er lease or	POOL GIV	se comming	ling order num	ber					
IV. COMPLETION DATA	i Hom any ou	er react or	pout, gr	C COLLLINE	mig Order main						
Designate Type of Completion	ı - (X)	Oil Well		Gas Weil	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Com	pi. Ready to	Prod.		Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth		
Perforations						<u> </u>			Depth Casing Shoe		
	TUBING, CASING AND				CEMENTING RECORD						
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET				SACKS CEMENT		
		<u></u>			-						
	-							<u> </u>			
					İ						
V. TEST DATA AND REQUE	ST FOR A	LLOW	ABLE						6 6.11 24 hav)	
OIL WELL (Test must be after Date First New Oil Run To Tank	Date of Te		of load	oil and musi	Producing M	exceed top all ethod (Flow, p	owable for the	is depin or be etc.)	jor juli 24 hou	<i>rs.)</i>	
Date Liter Idea On Krin 10 1 amr	Date of Te	. SL					7,6				
Length of Test	Tubing Pre	Tubing Pressure				Casing Pressure			Choke Size		
Actual Prod. During Test	Oil - Bbls.				Water - Bbls	Water - Bbls.			Gas- MCF		
GAS WELL											
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	Choke Size		
VI. OPERATOR CERTIFIC				NCE			VICED!	ΔΤΙΩΝΙ	DIVICIO	 }N	
I hereby certify that the rules and regulations of the Oil Conservation					OIL CONSERVATION DIVISION						
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					Date Approved						
MUU-2	<u></u>					- whhiave	D	- ಫ್ರೆಕ	<u> </u>		
Signature // L.	Pic	RCE		kint	By_		Faul Geo	lo _s ie t			
Printed Name / 19C		525-	Title	1915	Title						
Date /		Tele	ephone h	No.	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.
- 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.