STATE OF NEW MEXICO	· · · · · · · · · · · · · · · · · · ·	ATION DIVISION	Form C-104 Revised 10-1	- 78
DISTRIBUTION		30X 2088		
PILE	SANTA FE, NE	EW MEXICO 87501		
LAND OFFICE	REQUEST F	OR ALLOWABLE		
TRANSPORTER DAS		AND ISPORT OIL AND NATURAL GA	S	
PRONATION OFFICE Operator			······································	
GWR Operating Co.				<u> </u>
	, Suite 900, Houston, Texa			
Reason(s) for filing (Check proper New Well	box) Change in Transporter of:	Other (Please explain) Operator Nam	e Change Only	
Recompletion Change in Ownership	Oll Dry Casinghead Gas Cond		e 5/1/86	
Operator			······································	<u></u>
If change of & WideXiWAp give nam and address of previous & WideX_ Operato	L α D UII Company, Inc	. 9800 Centre Parkway,	#900, Houston,TX 770	36
DESCRIPTION OF WELL AN	D LEASE			
Boys Ranch	Well No. Pool Name, Including I East New Hop	. [	deral or Fee Fee	ease N
Location O	660 Feet From The South L	Ine and 1980 Feet F	East	
Unit Letter;;		•	rom ine	
Line of Section 29	Township 6-S Range	34-Е , ммрм,	Roosevelt	Count
DESIGNATION OF TRANSPO	OII XX or Condensate		pproved copy of this form is to be s	ent)
Pride Pipeline Company		P.O.Box 2436, Abilene, Texas 79604		
Name of Authorized Transporter of Casinghead Gas 🕅 or Dry Gas 🗌 Cities Service Oil & Gas Corporation		Address (Give address to which approved copy of this form is to be sent) Box 300, Tulsa, Oklahoma 74102		
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. 0.1 29 6-S 34-E	is gas actually connected? Yes	When 2/19/85	<u> </u>
	with that from any other lease or pool,		t	
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	Plug Back <sup>1</sup> Same Res'v. <sup>1</sup> D	iif. Rei
Designate Type of Comple			       	
Date Spudded	Date Compl. Ready to Prod.	Total Depth	P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.	j Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth	
Perforations		. <b>I</b>	Depth Casing Shoe	
	TUBING CASING AN	D CEMENTING RECORD		
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT	······································
	····			
TEST DATA AND REQUEST	FOR ALLOWABLE (Test must be a	fter recovery of total volume of load	oil and must be equal to or exceed	iop all
OIL WELL Date First New Oil Run To Tanks	able for this de	epth or be for full 24 hours) Producing Method (Flow, pump, ga		
Date First New OIL Hun 10 Tonks		Fibracing Monice II 1001 Pampi So		·
Length of Test	Tubing Pressure	Casing Pressure	Choke Size	
Actual Prod. During Test	Oll-Bbls.	Water - Bbis.	Gae - MCF	
<u></u>		1		
GAS WELL				
Actual Prod. Teel-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	
CERTIFICATE OF COMPLIA	NCE	OIL CONSERV	ATION DIVISION	
		APPROVED APR 2	3 1987	
Division have been complied will	l regulations of the Oil Conservation in and that the information given he best of my knowledge and belief.		LED BY JERRY SEXTON	
above is true and complete to th	te best of my knowledge and belief.	DISTRIC	TI SUPERVISOR	
~ 1-		TITLE	n compliance with RULE 1104	
Nattan Cart	2	If this is a request for all	lowable for a newly drilled or d	leepen
	natwej .	tests taken on the well in ac		
(1	itle)	All sections of this form able on new and recompleted	must be filled out completely fo wells.	or allo
5/2/86	) n i e l	Fill out only Sections I.	II, III, and VI for changes o orter, or other such change of c	f owne onditio
· · · · · · · · · · · · · · · · · · ·	)ale)		ust be filed for each pool in	

