Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico :gy, Minerals and Natural Resources Departm

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

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

OIL CONSERVATION DIVISION P.O. Box 2088

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.	T	O TRA	<u>NSP</u>	ORT OIL	AND NA	TURAL G		K () ()			
Operator							Well /				
Devon Energy Corporation						- 3002505232					
20 N. Broadway, S	uite 1	500 0	Okla	ahoma (City, C	K 731	02-8260)	_		
Reason(s) for Filing (Check proper box)						es (Please expl					
New Well		Change in	Transp Dry G		Char	ge of (Oil Tra	nsport	er		
Recompletion Change in Operator	Oil Casinghead		•		Oliul.	.50 01 .	J				
If change of operator give name		ليا									
and address of previous operator											
II. DESCRIPTION OF WELL	AND LEA	SE	D1 N	Varia Inches	an Formation		Vind .	(Lease	1	ease No.	
sse Name State "T" Well No. Pool Name, Including To Denton I								Federal or Fee			
Location			L	·····				177		/4	
Unit Letter N	: 990 Feet From The South Line and 2310 Feet From The West								Line		
_	•			-							
Section 2 Township	, 1 <u>5</u>	<u>s</u>	Range	371	E,N	MPM,		L€	ea	County	
Ш. DESIGNATION OF TRAN	SPORTE	R OF O	IL AN	D NATU	RAL GAS					•	
Name of Authorized Transporter of Oil	IXI E	ofrts	sale a	Dinblina	Address (Giv	e address to w	hich approved	copy of this f	orm is to be se	ni)	
EOTT OIL PIPELINE	co.		rdive		7.0. F	OX 466	6 нові	S NM	77210	-4666_	
Name of Authorized Transporter of Casinghead Gas					Address (Give address to which approved copy of this form is to be sent) 211 N. Colorado Midland TX 79701						
J.L. DAVIS										01	
If well produces oil or liquids, Unit ive location of tanks.		Sec. Twp. 2 15;		Rge. 371			Wiles	08-18-74			
If this production is commingled with that i									· · · · · · · · · · · · · · · · · · ·		
IV. COMPLETION DATA		· · · · · · · · · · · · · · · · · · ·					·		·		
Designate Type of Completion	- (20)	Oil Well	1	Gas Well	New Well	Workover	Deepen	Piug Back	Same Res'v	Diff Res'v	
Date Spudded		npl. Ready to Prod.			Total Depth	Total Depth			P.B.T.D.		
www uponous											
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth			
								Depth Casing Shoe			
Perforations								Depui Casii	ig Shoc		
		IRING	CASI	ING AND	CEMENTI	NG RECOR	2D	<u> </u>	 		
HOLE SIZE CASING & TUBING SIZE							SACKS CEMENT				
TIOLE OILE		OASING & TUBING CIZE			DEPTH SET						
	ļ			· · · · · · · · · · · · · · · · · · ·				 -		<u> </u>	
V. TEST DATA AND REQUES	TEODA	HOW	ARIE	,	<u></u>			<u> </u>			
Y. TEST DATA AND REQUES OIL WELL (Test must be after re	ecovery of lot	al volume	of load	I oil and must	be equal to or	exceed top all	owable for thi	depth or be	for full 24 hou	rs.) \	
Date First New Oil Run To Tank	Date of Test				Producing M	ethod (Flow, po	ump, gas lift, e	ic.)			
•							-	Choke Size	·		
Length of Test	Tubing Pressure				Casing Pressure			Choke Size			
Actual Prod. During Test	ual Prod. During Test Oil - Bbls.				Water - Bbis			Gas- MCF	Gas- MCF		
Actual Flore During Test	On - Bois.										
GAS WELL	 										
Actual Prod. Test - MCF/D	Length of T	est			Bbls. Conde	mate/MMCF	···	Gravity of	Condensate		
								O oh Sie			
Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size				
	1				┤┌			<u> </u>			
VL OPERATOR CERTIFIC				NCE	(OIL CON	ISFRV	ATION	DIVISIO	N	
I hereby certify that the rules and regul				ve.							
Division have been complied with and is true and complete to the best of my l	mat me mori knowledge an	d belief.	en # 00/	••	Date	Annrous	od DE	C 08	1993		
1661	•				Date	Approve		······	··· · · · · · · · · · · · · · · · · ·		
Mess/					By_	ORIGINAL	Signer a	Y D WALL	4		
Signature W.E. WINCE, JR.	Contra	ct Ad	lmin	istrat	11 *		GEOL.		€a		
Printed Name	CONCLA	<u>uu mu</u>	Title	<u> </u>	Title						
11-23-93	(40	5) -55	52- 4	606_							
Date	,	Tele	ephone	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.

