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

State of New Mexico Energy, Minerals and Natural Resources Department

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

DISTRICT II P.O. Drawer DD, Antenia, NM 88210 OIL CONSERVATION DIVISION
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.	1100					TURAL G					
I. TO TRANSPORT OIL AN Operator						Well API No.					
Hondo Oil & Gas Cor		300250530900									
Address											
Post Office Box 220	08, Roswe	11, Ne	w Me	xico	88202-22			·			
Reason(s) for Filing (Check proper box New Well)	<i>C</i> 1	T		XX On	her (Please exp	lain)	•			
Recompletion	Oil	Change in	Dry Gar		_			00	E Lais	•	
Change in Operator	Casinghea	4 Gas 🗀	Conden		Reques	st author oil - Ji	city to	sell 30	בוטמ פנ		
If change of operator give name	Changina		Conden	<u> </u>	SKIM C)11 - J/1	NE 9/				
and address of previous operator										 	
II. DESCRIPTION OF WELL	L AND LEA	ASE									
Lease Name	ase Name Well No. Pool Name, Inch					ling Formation			ind of Lease Lease No. late, Federal or Fee		
						Devonian & WC)					
Location Unit LetterD	66	50	Fact For	on The	West Lir	e and 66	50 -	eet From The	Nort	·h 1:	
						•		eet Lioni The	NOL	<u>In</u> Line	
Section 13 Towns	hip 15S		Range	37E	, N	МРМ,	Lea			County	
III. DESIGNATION OF TRA		R OF OI or Condens		NATU							
Name of Authorized Transporter of Oil		Address (Give address to which approved copy of this form is to be sent)									
Koch Oil Company					P.O. Box 1558, Breckenridge, TX 76024						
Name of Authorized Transporter of Casi	inghead Gas		or Dry (Gas	Address (Gi	ve address to w	hich approved	l copy of this f	form is to be s	ent)	
f well produces oil or liquids, Unit Sec. Twp. Rgs ve location of tanks.					Is gas actually connected? When ?						
If this production is commingled with tha	t from any other	er lease or p	ool, give	commingl	ing order num	ber:			· · ,,		
V. COMPLETION DATA		Oil Well	····	as Well	New Well	Workover	I D	l Dive Deels	Same Res'v	bia n - iii	
Designate Type of Completion	n - (X)	jon wen	i G	25 WEII	I MEM MEII	workover	Deepen .	i Piug Back	Same Kes v	Diff Res'v	
Date Spudded Date Compl. Ready to Prod.					Total Depth			P.B.T.D.	Д	<u></u> ,	
evations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay Tubi				ibing Depth		
Perforations					<u>.</u>			Depth Casing Shoe			
	ייי	URING (CACIN	C AND	CEMENTI	NC PECOD	<u> </u>	<u> </u>			
HOLE SIZE	TUBING, CASING AND ISING & TUBING SIZE			DEPTH SET			1 .	SACKS CEM	ENIT		
		ONORNO & PODING GIZE				50 H 60 1			SAGIO GEMENT		
/ TECT DATE AND DECUE	1000 000 11										
V. TEST DATA AND REQUE OIL WELL (Test must be after											
OIL WELL (Test must be after Date First New Oil Run To Tank	Date of Test		f load ou	and must	be equal to or	exceed top allow, put	wable for thi	depth or be j	or full 24 hou	rs.)	
Date I had to laik	Date of Test				Floducing Me	:uiou (<i>riow</i> , <i>pu</i>	mp, gas iyi, e	ic.)		•	
Length of Test	Tubing Press	Tubing Pressure				ге		Choke Size			
Actual Prod. During Test	Oil - Bbls.	Oil - Bbls.				Water - Bbis.			Gas- MCF		
GAS WELL							· · · · · · · · · · · · · · · · · · ·	<u></u>			
Actual Prod. Test - MCF/D	Length of Te	est			Bbls. Conden	sate/MMCF		Gravity of C	ondensate		
sting Method (pitot, back pr.) Tubing Pressure (Shut-in)					Casing Pressu	re (Shut-in)		Choke Size			
I. OPERATOR CERTIFIC				CE		···	OF5: ::	TIO: -		A 1	
I hereby certify that the rules and regu	lations of the O	il Conserva	tion	Ì		IL CON	SERVA	ATTON D	DIVISIO	N	
Division have been complied with and is true and complete to the best of my	that the inform	ation given	above	ļ							
is the and complete to the seat of my	knowledge and	bellet.			Date	Approved	d t		1911		
C:					_				2 m + 14		
Signature Patricia Moore Prod. Analyst					By <u>ORIGINAL SIGNED BY JERRY SEXTON</u> DISTRICT I SUPERVISOR						
Printed Name	·	_	itle	,	Title						
Date	505) 625	-6746 Telenh	one No.								

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.