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

State of New Mexico ergy, Minerals and Natural Resources Depart.

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

OIL CONSERVATION DIVISION DISTRICT II P.O. Drawer DD, Artesia, NM 88210

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.	TO:	THAN	ISPORT OI	L AND NA	TURAL G.	AS				
Operator					7 - 7 - 7 - 7 - 7		API No.			
Devon Energy Corporation (Nevada) Address					3002509868					
	20 N B	,	_, _							
1500 Mid-America Towe Reason(s) for Filing (Check proper box)	er, 20 N. B	roadv	vay, Oklai		t, OK 73 cr (Please expl					
New Well		nge in Tr	ansporter of:			•				
Recompletion Oil Dry Gas Under In Operator Name Effective										
Change in Operator	Casinghead Gas	c	ondensate		-1 -, -2	<i>.</i>				
If change of operator give name and address of previous operator Hono	do Oil & Ga	s Co.	, P. O. I	3ox 2208.	. Roswell	NM S	38202		4"	
II. DESCRIPTION OF WELL						7 1111	00202			
Lease Name	ling Formation Kind			of Lease No.						
B. C. Dickinson A-1 Location	2	Denton De				Federal or Fee				
Unit LetterL	:2240	F	ect From The	South Line	e and400	. F	eet From The	West	Line	
Section 1 Townsh	E , NMPM,			Lea County						
III. DESIGNATION OF TRAIN Name of Authorized Transporter of Oil		FOIL	AND NATU							
·	1431	ondensat	i l		e address io wi				ent)	
Shell Pipeline Co./AT Name of Authorized Transporter of Casi	P. O. Box 2648, Houston, TX 77001 Address (Give address to which approved copy of this form is to be sent)									
J. L. Davis	Dry Gas									
If well produces oil or liquids,	Is gas actually	connected?	When	land, TX 79702						
give location of tanks.	M	15S 37E	Ves		:	/6/54				
If this production is commingled with that IV. COMPLETION DATA	from any other leas	se or poo	ol, give comming	ling order numb	er: P	C-193				
Designate Type of Completion	ı - (X)	Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth			
Perforations					Depth Casing Shoe					
							Dejan Casio	g Snoe		
	TUBL	NG, C	ASING AND	CEMENTIN	NG RECOR	D		· · · · · · · · · · · · · · · · · · ·	····	
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT			
	-						(
V. TEST DATA AND REQUE	ST FOR ALLC)WAB	LE	J			1			
OIL WELL (Test must be after	recovery of total vol	wne of le	oad oil and must	be equal to or	exceed top allo	wable for this	depth or be f	or full 24 hou	rs.)	
Date First New Oil Run To Tank	Producing Method (Flow, pump, gas lift, etc.)									
Length of Test	Tal's D					·				
Exigure of Yes	Tubing Pressure			Casing Pressure			Choke Size			
Actual Prod. During Test	Oil - Bols.			Water - Bbls.			Gas- MCF			
C. C. W. W.					·		<u> </u>	· · · · · · · · · · · · · · · · · · ·		
GAS WELL Actual Prod. Test - MCF/D	11									
Actual Front Fest - Michiga	Length of Test			Bbls. Condensate/MMCF			Gravity of Condensate			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)			Choke Size			
VI ODED ATOR CERTIFIC	L CE CE			[
VI. OPERATOR CERTIFICATE OF COMPLIANCE						SERVI	TION F	אוופור	NNI	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above				OIL CONSERVATION DIVISION						
is true and complete to the best of my knowledge and belief.				5.	A	t	41	11 000	າດ	
Imp // L	Date	Approved	J	Jl	ון עט	<u> </u>				
All Crankovint	1									
Signature // J. M./Duckworth	By ORIGINAL SIGNED BY JERRY SEXTON									
J. M./Duckworth Operations Manager Printed Name / 2 / 7 Title				DISTRICT I SUPERVISOR						
6/32/92	405/235-		••	Title_				en many consequently		
Date	The state of the s									

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.