OULD State Note: NM 8210       OIL CONSERVATION DIVISION PO. Box 2088         Samta Fe, New Mexico 87504-2088         Charge of particip to sama         New Veil         Charge in Transporter of: Stange of openitor by ensme         Lase Name         Lase Name         Veil No. Poy Gas         Sombrero MS State         1       South Kemnitz Cisco         South Carge in Transport of the same         Veil No. Poy Case         South Kemnitz Cisco         Value Letter       J         1       South Kemnitz Cisco         Value Letter       J         105       <		State of Ne Energy, Minerals and Natu		Form C-104 Revised L-1-89 See Instructions at liottom of Page	
Same Tell         Same Te, New Mexico 87094-2083           BOIRD Balance Rd, Astee, NM 8740         REQUEST FOR ALLOWABLE AND AUTHORIZATION           TO "RANSPORT OIL AND NATURAL GAS         TO "RANSPORT OIL AND NATURAL GAS           Optimizer         VATES PETROLEUN CORPORATION         Vall AT No.           Addees         IO South 4th St., Artesia, IM 88210         Design in Transporter of Complex Roll           Records for Hing (Code prover Roll         Catege in Transporter of Complex Roll         Design in Transporter of Codesente           Records for Hing (Code prover Roll         Catege in Transporter of Codesente         Effective Date: January 1, 1991           Records for Hing (Code prover Roll         Catege in Transporter of Codesente         Effective Date: January 1, 1991           Into Scott Attack operation operation         Example formation         East 1           South Kemmitz Clisco         East Lase No.         Lase No.           South For ON S State         1         South Kemmitz Clisco         East Luise           South For ON S State         165         Reage 332         PontMat. Leta         Country           It. DESCINATION OF TRANSPORTER OF OIL AND NATURAL GAS         Norther disport of an us be sent?         Country           The oppose of categes of the form us obe sent?         Conces of the prove as bes sent?         Concoco.           Conces of transp	P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Artesia, NM 88210	P.O. Bo	x 2088	at Dough of 1 age	
HECOLOS IF DCH ALLOWABLE AND NOT HOL AT DATA         TO TANSPORT OIL AND NATURAL GAS         Weil API No.         YATES PETROLEUM CORPORATION         Addeed         105 South 4th St., Artesia, 144         Recomption         Recomption         ON         Recomption         ON         Recomption         ON         States 0 openior for the state openior of categored Gu         Categored         Categored         Categored Gu	DISTRICT III Santa Fe, New Mexico 87504-2088				
YATES       PETROLEUM CORPORATION         Address       105       South 4th St., Artesia, IM       88210         Records for Files (Code Apport Not)       Catege in Transports of Records (or Files (Code Apport Not)       Catege in Transports of Records (or Files (Code Apport Not)         Records (or Files (Code Apport Not)       Oil (SL DD (Sa )       Effective Date: January 1, 1991         Catege in Opena (Opena)       Oil (SL DD (Sa )       Effective Date: January 1, 1991         Catege in Opena (Opena)       Oil (SL DD (Sa )       Effective Date: January 1, 1991         Catege in Opena (Opena)       South Kemnitz Cisco       Sud_Proferio Fee       Lese No.         Sonbrero MS State       1       South Kemnitz Cisco       Sud_Proferio Fee       Lese No.         South Transport Ming Transport Olic       Feel From The South Line and 1650       Peel From The East       Line         Transport Ming Transport Cation       PLO. Food Approved copy of this form is to be send?       Contro         Tread O Transport Cation       PLO. Food Approved copy of this form is to be send?       Contro         Tread O Transport Cation       PLO. Food Approved copy of this form is to be send?       Contro         Yeel produce is transport of Categotad Gat [C] or DD Gat Addres (Gree address to which approved copy of this form is to be send?       Conceco. Inc.         Yeel produce is transport Cation <t< td=""><td colspan="5">I. TO "RANSPORT OIL AND NATURAL GAS</td></t<>	I. TO "RANSPORT OIL AND NATURAL GAS				
Addense       105 South 4th St., Artesia, NM 88210         Reaso(d) for Fileg (Chr.d, proper boar)       Charge in Transport of:       Other (Filege explain)         New Will       Charge in Transport of:       Effective Date: January 1, 1991         Charge of operator       Caingbod Gu Condense       Effective Date: January 1, 1991         Charge of operator operator       Caingbod Gu Condense       Effective Date: January 1, 1991         Charge of operator operator       Caingbod Gu Condense       Effective Date: January 1, 1991         Lass Nuc       South Kemmitz Cisco       Supprovement operator         Lass Nuc       South Kemmitz Cisco       Supprovement operator         Unit Letter       J       165C       Feet From The South Line and 1650       Feet From The East Line         Sombor For MS State       Vol Wed Net       Other (Filese address to which approved copy of his form is to be seel)         The Science Trading Transport of Campbed Gu       Vol Sedenate       P.O. Exp. 6156 - Midland. TX. 79711         Name of Auborid Transport of Campbed Gu       Vol Sedenate or which approved copy of his form is to be seel)       Connect         Concord       Vol Sedenate or on Campbed Gu       Vol Sedenate or which approved copy of his form is to be seel)       Concord         The Science Trading Transport of Campbed Gu       Vol Sedenate Gu which appreved copy of his form is to be seel)	Operator				
Bauecki Or Filing (Check proper bod)       Outer get in Transporter of:       Other (Picase explain)         New Well       Outer get in Transporter of:       Effective Date: January 1, 1991         Charge in Operator       Caninghead Gas       Effective Date: January 1, 1991         Charge in Operator       Caninghead Gas       Effective Date: January 1, 1991         Charge in Operator       Caninghead Gas       Effective Date: January 1, 1991         Loss Name       New Well       Condenance       Effective Date: January 1, 1991         Loss Name       Well No. None, Including Formation       Saue_Predenior Fre       Loss Name         Sombrero MS State       1       South Kemmitz Cisco       Saue_Predenior Fre       Loss Name         Socion       22       Township       165       Range       33E       NMPM,       LCa       County         III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       Name of Authonical Transport Stion       P.O. Rox 6136.5 - Midland. TX 79711       Name of Authonical Transport Stion       Addres (Give address to which approved copy of this form is to be sent)         Veri produces of Indukt.       J       £2       16S       33E       Yes       6-30-80         Take poolacion is comminging order takes of pool, give comminging order tamber:       V. CONTLETION DATA       Dates Capit, Redy to Prod.       Ioal	Address				
New Well       Charge in Transporter OL       Effective Date: January 1, 1991         Charge in Openco Byre sums       Contangent Openco Byre sums       Contangent Openco Byre sums         In DESCRIPTION OF WELL AND LEASE       Image of Openco Byre sums       Lease No.         Low None       Well No. Pool Name, including Formation       Lease No.         Sombrero MS State       1       South Kemnitz Cisco       Lease No.         Lowins       January 1, 1991       Contangent Openco       Lease No.         Unit Letter       J       165C       Feel From The       East       Lease No.         Unit Letter       J       165C       Feel From The       East       Lease No.         Science       22       Townskip       165       Range 33E       NMPM, Let a       Country         II.       DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       Name of Autonical Transport Calino       P.O.       Root 616.       Nilland., TX. 79711         Name of Autonical Transport Calino       Of Condestate       P.O.       Root 616.       Nulland.       TW       P.O.       Root 616.       P.O.       P.O. </td <td colspan="5"></td>					
I dester of generic give sime dester of generic gen	New Well     Charge in Transporter of:       Recompletion     Oil     X Dry Gas     Effective Date:     January 1, 1991				
1. DESCRIPTION OF WELL AND LEASE         Lesse Nume         Sombrero MS State       1       South Kernitz Cisco       Sum_Shoken or Fee       LG=3819         Location       Unit Letter       J       :165C       Feet From The South Line and 1650       Feet From The East Line         Socion       22       Township       165       Range 33E       :NMPM, Lea       Country         III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       Name of Audotast Gine address to whick approved copy of this form is to be senil)       P.O., BOX 6126 Midland, TX 79711         Name of Audotast Transport Califor       P.O., BOX 6126 Midland, TX 79711       Name of Audotast to which approved copy of this form is to be senil)         Vesture of transport Califor       Uset       22       165       33E       Yes         COnocco, Inc.       Uset       Social Yes       6-30-80       Social Yes       6-30-80         Vesture of Canapter of Canapter of Califore adverse or pool, give comminging order number:       V. COMPLETION DATA       Desphate Type of Completion - (X)       Well Yes       6-30-80         Designate Type of Completion - (X)       Oti Well       Gas Well       New Well Yes hower       Deephe Same Rev       port Rev         Das Spudde       Date Completion - (X)       Oti Well       Gas Well       Total Depth       P.D. <td>If change of operator give name</td> <td></td> <td></td> <td></td>	If change of operator give name				
Lase Nume       Wei Na       Pool Name, Including Formation       Lase No.       Lase No.         Sombrero MS State       1       South Kemnitz Cisco       Sausy-tederal or Fee       LG-3819         Location       Unit Letter					
Unit Letter       J       165C       Feet From The       South       Line       East       Line         Section       22       Township       16S       Range       33E       , NMPM,       Lea       Country         III.       DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS       Address (Give address to which approved copy of this form is to be sent)       P. O., BOX 6126 - Milland, TX 79711       Name of Audoress to which approved copy of this form is to be sent)         The of Audorest Transport of Caliphead Gas       ZJ or Dry Gas       Address (Give address to which approved copy of this form is to be sent)         Concoc, Inc.       P.O., BOX 6126 - Milland, TX 79711       Name of Audoress of the East of the Sent of Concoc, of this form is to be sent)         Concoc, Inc.       Unit       Sec.       Twp, Rgs. Is gas actually connected?       When ?         Vie boates of totals       J       22       16S       33E       Yes       6-30-80         Previous of totals       J       22       16S       34E       Yes       6-30-80         Designate Type of Completion - (X)       10i Well       Gas Well       New Well       Wocover       Doepen       Plug Back Same Res'v       Diff Res'v         Date Spadded       Date Completion - (X)       10i Well       Gas Well       New Well       Wocover	Lease Name Sombrero MS State	Well No. Pool Name, Includin			
Interference of Coll. AND NATURAL GAS         Name of Authorized Transport of Cadenate       Address (Give address to which approved copy of this form is to be sent)         Texaco Trading Transport of Calingband Gas       Colspan="2">Or Cadenate       P.O., Box 6196 - Midland, TX 79711         Name of Authorized Transport of Calingband Gas       Colspan="2">Or Dry Gas       Address (Give address to which approved copy of this form is to be sent)         Conocco, Inc.       Inc.       Name of Authorized Transport of Calingband Gas       Zol       or Dry Gas       Weil For this form is to be sent)         Conocco, Inc.       Usit       Sec.       Twp.       Rge.       Is gas actually connected?       When ?         Vie lecation of uakk.       J       2.2       16.5       33E       Yes       6-30-80         If this production is commingled with that from any other leave or pool, give commingling order number:       IV.       CONPLETION DATA         Designate Type of Completion - (X)       Intel Gas Weil       New Weil       Workover       Deepen       Plug Back [Same Res'v)       Diff Res'v         Date Spudded       Date Compl. Reidy to Prod.       Total Depth       P.B.T.D.       P.B.T.D.         Cervices       TUB NG, CASING AND CEMENTING RECORD       Depth Casing Shoe       Depth Casing Shoe         V. TEST DATA AND REQUEST FOR ALLOWABL	Т	: 165C Feet From The SC	$\frac{1650}{1650}$	reet From TheLine	
Interference of Coll. AND NATURAL GAS         Name of Authorized Transport of Cadenate       Address (Give address to which approved copy of this form is to be sent)         Texaco Trading Transport of Calingband Gas       Colspan="2">Or Cadenate       P.O., Box 6196 - Midland, TX 79711         Name of Authorized Transport of Calingband Gas       Colspan="2">Or Dry Gas       Address (Give address to which approved copy of this form is to be sent)         Conocco, Inc.       Inc.       Name of Authorized Transport of Calingband Gas       Zol       or Dry Gas       Weil For this form is to be sent)         Conocco, Inc.       Usit       Sec.       Twp.       Rge.       Is gas actually connected?       When ?         Vie lecation of uakk.       J       2.2       16.5       33E       Yes       6-30-80         If this production is commingled with that from any other leave or pool, give commingling order number:       IV.       CONPLETION DATA         Designate Type of Completion - (X)       Intel Gas Weil       New Weil       Workover       Deepen       Plug Back [Same Res'v)       Diff Res'v         Date Spudded       Date Compl. Reidy to Prod.       Total Depth       P.B.T.D.       P.B.T.D.         Cervices       TUB NG, CASING AND CEMENTING RECORD       Depth Casing Shoe       Depth Casing Shoe         V. TEST DATA AND REQUEST FOR ALLOWABL	Section 22 Townshin	100 005	-	County	
Texaco Trading Transportation       P.O. Box 6196 - Midland, TX 79711         Name of Authorized Transporter of Casinghead Gas       Zi       or Dry Gas       Address (Give address to which approved copy of this form is to be sent)         If well produces oil or liquids, Unit       Unit       Sec.       Twp.       Rge.       Is gas actually connected?       When ?         If well produces oil or liquids, Unit       Sec.       Twp.       Rge.       Is gas actually connected?       When ?         If well produces oil or liquids, Unit       Sec.       Twp.       Rge.       Is gas actually connected?       When ?         If well produces oil or liquids, Unit       Unit       Sec.       Twp.       Rge.       Is gas actually connected?       When ?         If well produces oil or liquids, Unit Sec.       J       Z I SS       33E       Yes       6-30-80         If well produces oil or liquids, Unit Sec.       If Sec.       New Well Workover       Deepte       Plug Back Same Res'v Diff Res'v         Date Spadded       Date Compl. Resdy to Prod.       Total Depth       Plus Back Same Res'v Diff Res'v       Diff Res'v         Date Spadded       Date Compl. Resdy to Prod.       Top Oil/Gas Pay       Tubing Depth       Plus Back Same Res'v Diff Res'v         Perforations       Date Of Producing Formation       Top Oil/Gas Pay <t< td=""><td colspan="5">III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS</td></t<>	III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Casinghead Gas CONOCO, Inc. If well produce of or liquids, J 22 16S 33E Yes 6-30-80 This production is commissified with that from any other lease or pool, give commingling order number: If well produce of or liquids, J 22 16S 33E Yes 6-30-80 This production is commissified with that from any other lease or pool, give commingling order number: If well produce of a liquids, J 22 16S 33E Yes 6-30-80 This production is commissified with that from any other lease or pool, give commingling order number: If well produce of a liquid with that from any other lease or pool, give commingling order number: If well produce of Completion - (X) Designate Type of Completion - (X) Date Spudded Date Compl. Ready to Prod. Total Depth PB.T.D. Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Perforations TUB NG, CASING AND CEMENTING RECORD HOLE SIZE CASINC & TUBING SIZE DEPTH SET SACKS CEMENT V. TEST DATA AND REQUEST FOR ALLOWABLE V. TEST DATA AND REQUEST FOR ALLOWABLE V. TEST DATA AND REQUEST FOR ALLOWABLE V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL Creat must be after recovery of total vitume of load oil and must be equal to or escent top allowable for this depth or be for full 24 hours.) Date First New Oil Run To Tank Date of Test Casing Pressure Chocke Size Casing Pressure Chocke Siz	-				
If well produces oil or liquids, jow location of balks.       Unit       Sec.       Twp.       Rgc.       Is gas actually connected?       When ? 6-30-80         I bus productions in commingled with that from any other less or pool, give commingling order number:	Name of Authorized Transporter of Casing				
give location of tanks.       J       22       16S       33E       Yes       6-30-80         If this production is commingled with that from any other lease or pool, give commingling order number:		Unit Sec. Twp. Rge.	Is gas actually connected? Whe		
IV. COMPLETION DATA         Designate Type of Completion - (X)         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         Perforations       TUB NG, CASING AND CEMENTING RECORD         HOLE SIZE       CASING & TUBING SIZE       DEPTH SET         SACKS CEMENT       SACKS CEMENT         V. TEST DATA AND REQUEST FOR ALLOWABLE       Date of rest         OIL WELL       (Test must be after recovery of total viture of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)         Date First New Oil Run To Tank       Date of Test         Length of Test       Casing Pressure         Actual Prod. Test - MCF/D       Length of Test         Uail Prod. Test - MCF/D       Length of Test	give location of tanks.	J 22 16S 33E	Yes	6-30-80	
Designate Type of Completion - (X)       Oil 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       Depth Casing Shoe         TUB NG, CASING AND CEMENTING RECORD         HOLE SIZE       CASINC & TUBING SIZE       DEPTH SET       SACKS CEMENT         V. TEST DATA AND REQUEST FOR ALLOWABLE       Date of Test       Producing Method (Flow, pump, gas lift, etc.)         Date First New Oil Run To Tank       Date of Test       Producing Pressure       Choke Size         Gas WELL       Oil - Bbls.       Water - Bbls.       Gas- MCF         Gravity of Condensate/MMCF	If this production is commingled with that from any other lease or pool, give commingling order number:				
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       Depth Casing Shoe         TUB NG, CASING AND CEMENTING RECORD         HOLE SIZE       CASINC & TUBING SIZE       DEPTH SET       SACKS CEMENT         V. TEST DATA AND REQUEST FOR ALLOWABLE       OIL WELL       (Test must be after recovery of total withme of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)         Date First New Oil Run To Tank       Date of Test       Producing Method (Flow, pump, gas lift, etc.)         Choke Size         GAS WELL       Oil - Bbls.       Water - Bbls.       Gas- MCF         Gravity of Condensate/MMCF       Gravity of Condensate/       Gravity of Condensate/	ſ	Oil Well Gas Well	New Well Workover Deepen	Plug Back Same Res'v Diff Res'v	
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth Perforations Depth Casing Shoe TUB NG, CASING AND CEMENTING RECORD HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT V. TEST DATA AND REQUEST FOR ALLOWABLE OIL WELL (fest must be after recovery of total witume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.) Date First New Oil Run To Tank Date of Test Length of Test Tubing Pressure Choke Size Actual Prod. During Test Oil - Bbls. Casing Pressure Choke Size GAS WELL Actual Prod. Test - MCF/D Length of Test Ubits. Condensate/MMCF Gravity of Condensate			Total Depth	P.B.T.D.	
Perforations       Depth Casing Shoe         Perforations       Depth Casing Shoe         HOLE SIZE       CASINC & TUBING SIZE       DEPTH SET       SACKS CEMENT         V. TEST DATA AND REQUEST FOR ALLOWABLE       OIL WELL (Test must be after recovery of total vilume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)       Date first New Oil Run To Tank         Date First New Oil Run To Tank       Date of Test       Producing Method (Flow, pump, gas lift, etc.)         Length of Test       Tubing Pressure       Choke Size         Actual Prod. During Test       Oil - Bbls.       Water - Bbls.       Gas- MCF         GAS WELL       Actual Prod. Test - MCF/D       Length of Test       Ublis. Condensate/MMCF       Gravity of Condensate	•		7		
TUB NG, CASING AND CEMENTING RECORD         HOLE SIZE       CASING & TUBING SIZE       DEPTH SET       SACKS CEMENT         HOLE SIZE       CASINC & TUBING SIZE       DEPTH SET       SACKS CEMENT         V. TEST DATA AND REQUEST FOR ALLOWABLE       Image: Colored and must be equal to or exceed top allowable for this depth or be for full 24 hours.)         OIL WELL       (Test must be after recovery of total witume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)         Date First New Oil Run To Tank       Date of Test         Length of Test       Producing Method (Flow, pump, gas lift, etc.)         Length of Test       Tubing Pressure         GAS WELL       Gas- MCF         Actual Prod. Test - MCF/D       Length of Test         Ublis. Condensate/MMCF       Gravity of Condensate         Choke Size       Condensate/MMCF	Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	Top OlvGas Pay	Tubing Depth	
HOLE SIZE       CASING & TUBING SIZE       DEPTH SET       SACKS CEMENT	Perforations Depth Casing Shoe				
NOLE SIZE       Order of Tooling of the article of the a				SACKS CEMENT	
OIL WELL       (Test must be after recovery of total wilume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)         Date First New Oil Run To Tank       Date of Test       Producing Method (Flow, pump, gas lift, etc.)         Length of Test       Tubing Pressure       Choke Size         Actual Prod. During Test       Oil - Bbls.       Water - Bbls.       Gas- MCF         GAS WELL       Length of Test       Ubis. Condensate/MMCF       Gravity of Condensate	HOLE SIZE	CASINC & TUBING SIZE	DEFINISET		
OIL WELL       (Test must be after recovery of total wilume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)         Date First New Oil Run To Tank       Date of Test       Producing Method (Flow, pump, gas lift, etc.)         Length of Test       Tubing Pressure       Choke Size         Actual Prod. During Test       Oil - Bbls.       Water - Bbls.       Gas- MCF         GAS WELL       Length of Test       Using fressure       Gravity of Condensate			· · · · · · · · · · · · · · · · · · ·		
OIL WELL       (Test must be after recovery of total wilume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)         Date First New Oil Run To Tank       Date of Test       Producing Method (Flow, pump, gas lift, etc.)         Length of Test       Tubing Pressure       Choke Size         Actual Prod. During Test       Oil - Bbls.       Water - Bbls.       Gas- MCF         GAS WELL       Length of Test       Ubis. Condensate/MMCF       Gravity of Condensate					
Date First New Oil Run To Tank       Date of Test       Producing Method (Flow, pump, gas lift, etc.)         Length of Test       Tubing Pressure       Casing Pressure       Choke Size         Actual Prod. During Test       Oil - Bbls.       Water - Bbls.       Gas- MCF         GAS WELL       Length of Test       Bbls. Condensate/MMCF       Gravity of Condensate	V. TEST DATA AND REQUEST FOR ALLOWABLE				
Length of Test     Tubing Pressure     Cashing Pressure     Gas- MCF       Actual Prod. During Test     Oil - Bbls.     Water - Bbls.     Gas- MCF       GAS WELL     Actual Prod. Test - MCF/D     Length of Test     Bbls. Condensate/MMCF     Gravity of Condensate					
Length of Test     Tubing Pressure     Cashing Pressure     Gas- MCF       Actual Prod. During Test     Oil - Bbls.     Water - Bbls.     Gas- MCF       GAS WELL     Actual Prod. Test - MCF/D     Length of Test     Bbls. Condensate/MMCF     Gravity of Condensate			Coving Processor	Choke Size	
Actual Prod. During Test     Oil - Bbis.       GAS WELL       Actual Prod. Test - MCF/D     Length of Test       Bbis. Condensate/MMCF     Gravity of Condensate       Output     Output	Length of Test	Tubing Pressure	Casing Pressure		
Actual Prod. Test - MCF/D Length of Test Bbls. Condensate/MMCF Gravity of Condensate	Actual Prod. During Test	Oil - Bbls.	Water - Bbis.	Gas- MCF	
Testing Method (puot, back pr.) Tubing Pressure: (Shut-in) Casing Pressure (Shut-in) Choke Size	Actual Prod. Test - MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate	
	Testing Method (pilot, back pr.)	Tubing Pressun: (Shut-in)	Casing Pressure (Shut-in)	Choke Size	
VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation Division have been complete to the best of my knowledge and belief. Date Approved	I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above		DEC 1 7 1990		
Quarity Goodlett JLG By By BANDARD BY BANDARD	quarit# Goo	dett J.G	By <u>the strate water of a strate</u>		
Juanita Goodrett - reordeeron bapor.					
12-14-90 (505) 748-1471					
Date Telephone No.					

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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.

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All sections of this form must be filled out for allowable on new and recompleted wells.
 Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 Separate Form C-104 must be filed for each pool in multiply completed wells.