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Submit 5 Copies Appropriate District Office DISTRICT I	E	inergy, Mi	State of N nerals and Nat	ew Mexico ural Resour		=nt	Form C-104 Revised 1-1-89		
P.O. Box 1980, Hobbs, NM 88240 <u>DISTRICT II</u> P.O. Drawer DD, Artenia, NM 88210	(OIL CO		TION DIVISION				See Instructions at Bottom of Page	
DISTRICT III	Santa Fe, New Mexico 87504-2088								
1000 Rio Brazes Rd., Aztec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION									
I. TO TRANSPORT OIL AND NATURAL GAS									
Operator Headington Oil Company									
Address							-025-29066	· · · · · · · · · · · · · · · · · · ·	
7557 Rambler Road, Suite 1150, Dallas, Texas 75231 Reason(s) for Filing (Check proper box) Other (Please explain)									
New Well	Other (Please explain) Change in Transporter of:								
Recompletion	Oil	Xil Dry Gas Effortivo (=1-90							
If change of operator give name									
and address of previous operator Oryx Energy Company, P. O. Box 1861, Midland, Texas 79702									
Lease Name	SCRIPTION OF WELL AND LEASE					State Kind of Lease Lease No.			
State Land 76	3 Anderson Ranch Wolfcamp						Federal or Fee		
Unit Letter	_ :66	<u>0 </u>	eet From The	East Lin	e and4720	Fe	et From The	South Line	
Section 2 Township 16-S Range 32-E , NMPM, Lea County									
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS									
Name of Authorized Transporter of Oil	X	or Condense		Address (Gin			copy of this form		
Shell Pipeline Company							exico 882 copy of this form		
Conoco, Inc. If well produces oil or liquide,	onoco. Inc.				Drawer 12	67, Pon	co City, (
give location of tanks.		Sec. Twp. Rge. Is gas actually connected? When ?					7		
If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA									
Designate Type of Completion	· (X)	Oil Well	Gas Well	New Well	Workover	Deepea	Plug Back Sau	ne Res'v Diff Res'v	
Date Spudded	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.	I	
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth		
Perforations								Depth Casing Shoe	
	TUBING, CASING AND			CEMENTING RECORD			I		
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT		
V. TEST DATA AND REQUES				<u> </u>			<u> </u>]	
OIL WELL (Test must be after recovery of total volume 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 (Fiow, pump, gas lift, etc.)									
Length of Test	Tubing Pressure			Casing Pressure			Choke Size		
Actual Prod. During Test Oil - Bbls.				Water - Bbis.			Gaa- MCF		
GAS WELL	l	·							
Actual Prod. Test - MCF/D	Length of T	est		Bbis. Condensate/MMCF			Gravity of Cond	enstie	
Testing Method (pilot, back pr.)									
	Tuoling Free	sure (Shut-in)	Casing Pressure (Shut-in)			Choke Size		
VL OPERATOR CERTIFICATE OF COMPLIANCE									
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.				Date Approved MAY 2 4 1990					
Michael Alle Michael Allen					· · ·				
Signature Vice President					By Orig. Signed by				
Printed Name / Title				Title Geologist					
5/30/90 2/4/6960606 Date Telephone No.					<u></u>				
			· · · ·						

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.

APR 19 1990