Appropriate Destroit Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

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

CHIE OF LACK LATENATO Tergy, Minerais and Natural Resources Departr t

GOEIVED Form C-104
Revised 1-1-89
See Assirtaction

## OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

MAY -9 '90

DISTRICT III 1000 Rio Brizos Rd., Aziec, NM 87410		Sar	na re, ne	W M	exico 8/30	14-2088	5		<b>U</b> . C.	D.				
REQUEST FOR ALLOWABLE AND AUTHORIZATION ARTESIA, OFFICE TO TRANSPORT OIL AND NATURAL GAS														
TO TRANSPORT OIL AND NATURAL Ultramar Production Company								Well API No.						
Address Sitramar Produc	tion Co	mpany							11/A					
Resson(s) for Filing (Check proper pox)	, Suite	1200,	Housto	n,	77060	O et (Piease	ATDIAN	-1						
New Well		Change in	Transporter o	f:		21 11 151234	. CLIPTIO	••						
Recompletion	Oil	_	Dry Gas											
Change in Operator X	Caringhead		Condensate	<u> </u>	- 00	D	210	0 11-	-	77050	0100			
L DESCRIPTION OF WELL AND LEASE														
Less Name	ng Formation Kind				of Lease Lease No.									
Shipp 34	3   Casey (St				rawn) State				Federal of Fee Fee					
Unit Letter M	: 660 Feet From The We				est Line and 510 Fe				et From The South					
Section 34 Township	<b>.</b> 16S		Range	378	. NI	ирм.		Lea			County			
III DESIGNATION OF TRAN	CDODTT	OFOR	r A NITO NI	A 777 TI	<u> </u>		<del></del>							
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil		or Condens		AIU	Address (Give		to wat	л арргочеа	copy of this jo	orm is to be sen	K)			
Texaco Trading & Tr	ansport				P.O.				and. TX					
Name of Authorized Transporter of Casas		Dav	or Dry Gas (	<del></del>	Address (Give				and. TX	70702	2)			
If well produces out or tigands, give location of traits.			Twp.	Rgs. 37E	أربعمها وحواوا			When			:			
If this production is commungled with that	from any othe				yes	er			3-24-07					
IV. COMPLETION DATA		0.2.2.	- C TV	· - 11	N1 11/ 11/ 11	931			·	ic o	<b>5.</b>			
Designate Type of Completion	- (X)	Oil Well	Gas W	en	New Well	Workov	ver	Deepen	Plug Back	Same Res'v	Diff Res'v			
Date Spudded	Date Compt	Ready to	Prod.		Total Depth				P.B.T.D.					
Elevations (DF, RKB, RT, GR, etc.)	ons (DF, RKB, RT, GR, etc.) Name of Producing Formstion					Top Oil/Gas Pay				Tubing Depth				
Performions										Depth Casing Shoe				
TUBING, CASING AND CEMENTING RECORD														
HOLE SIZE	DEPTH SET				SACKS CEMENT									
	<del>:</del>				·				<u> </u>					
V. TEST DATA AND REQUEST FOR ALLOWABLE 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		, road bu de		Producing Me					O / 101 1 V 100 3	···			
Length of Test	Tubing Pres	RIFE			Casing Pressu	ne .	<del></del>		Choke Size		<u> </u>			
									Gas- MCF					
Actual Prod. During Test	Oil - Bbis.				Water - Bbis.				Gas- MCF					
GAS WELL		-					-							
Actual Prod. Test - MCF/D	Length of Test				Bbis. Concensue/MMCF				Gravity of Condensals					
esting Method (puot. back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shis-in)				Choice Size					
VL OPERATOR CERTIFIC	ATE OF	COMPI	LANCE				<u> </u>		A TION !!	201010				
I hereby certify that the rules and regulations of the Oil Conservation  Division have been compiled with and that the information given above					OIL CONSERVATION DIVISION									
is true and complete to the best of my k		Appro					- <b>▼</b> 							
Pay O. Lu	unt.					، انظماد								
Signature Supervisor of Polly A. Koontz Regulatory Affairs					By ORIGINAL SIGNED BY JEERLY SEXTON DISTRICT I SUPERVISOR									
Printed Name 5/3/90			Title	-	Title_									
Desc 5/3/90	/13		bos 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.
- 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.