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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, Artesia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088

DISTRIC	ш				
1000 Rio	Brazos	Rd.,	Aziec,	NM	87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

County   Company   County		TO TRANSPO	RT OIL A	ND NAT	JRAL GAS	3				
Other Privace explains   Other Privace explains						30	025 -	No. 125-00898		
Cange in Transporter of Cange in Transporter of Cange in Transporter of Cange in Operator of	tress P.O. BOY 1933	- Rosmell	M	88∋€	1)					
DESCRIPTION OF WELL AND LEASE  Well No. Pool Name, lociusing Formation.  Unit Latter M. Stage Federal or Fee W. M. C. C. Peet Prom The S. Line and W.C. Feet From The L. Line Section / J. Township PS. Range 32 E. NMFM. J. C. Feet From The L. Line and W.C. Feet From The L. Line and W.C. Feet From The L. Line Section // Township Promotion of Company of Authority Township Transporter of On Company of Authority Transporter of On Company of One of Company of Company of One of Company of One	w Well	Oil Dry Gas	7		int to	ii. Turned VH- Do	ion te	piak		
DESCRIPTION OF WELL AND LEASE  Well No. Dealboar  Unit Letter  M. CLUC Peet From The S. Line and CLUC Peet From The L1 Line  Section //p Township /95 Range 32 E. NMFM. LCQ  County  T. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  And the company of the form to be sent)  The performance of Company of Condensate Applies (Give address to which approved copy of this form is to be sent)  Hand Produced the Free Perform The S. Line and CLUC Peet From The L1 Line  Section of tasks  Applies (Give address to which approved copy of this form is to be sent)  Performance of the liquid, Line Sec. Top Gas Dealboar (Give address to which approved copy of this form is to be sent)  Hand Produced of the liquid, Line Sec. Top Gas Dealboar (Give address to which approved copy of this form is to be sent)  Performance of the liquid, Line Sec. Top Gas Dealboar (Give address to which approved copy of this form is to be sent)  When Production is communicated with that from any other lease or pool, give communicated?  When Production is communicated with that from any other lease or pool, give communicated?  When Production is communicated with that from any other lease or pool, give communicated?  When Production is communicated with that from any other lease or pool, give communicated?  When Production is communicated with that from any other lease or pool, give communicated?  When Production is communicated with that from any other lease or pool, give communicated?  When Production is communicated with that from any other lease or pool, give communicated?  When Production is communicated with that from any other lease or pool, give communicated?  When Production is communicated with that from any other lease or pool, give communicated?  When Production is communicated by the production of the old give communicated?  When Production is communicated by the production of the old give communicated?  Whe	hange of overstor give name									
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Use Letter   Feet From The   Lise and   U.C.   Feet From The   Lise   Section   I/P   Township   I/P   Range   3.2.6.   NMPM,   LeQ   Country		Well No. Pool Na	ST LU	SK D	- lawAr	State, F	ederal or Fee	VB-0		
DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS   Address (Give address to which approved copy of this form is to be seen)	$\mathcal{M}$	: 640 Feet Fr	om The	Line	and 44	<i>C</i> ) F∞	t From The	11/	Line	
ange of Authorized Trasporter of Color Condensate	Section // Township	p 195 Range	32	E, NM	IPM,	Lea			County	
Phi   P S   Pot	ame of Authorized Transporter of Oil Audl Prolline Com	or Condensate		Address (Give P.O. BO)	C2436 .	alalen	OTX -	79600	<i>f</i>	
TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING A TUBING SIZE  DEPTH SET  DEFT DATA AND REQUEST FOR ALLOWABLE  OIL WELL  (Far 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 hows.)  Dete first New Oil Run To Tank  Date of Test  Tubing Pressure  Actual Prod. Test  Actual Prod. Test  Tubing Pressure  Actual Prod. Test  Tubing Pressure  Casing Pressure  (Shut-in)  Casing Pressure  Casing Pressure  Casing Pressure  (Shut-in)  Casing Pressure  Casing Pressure  (Shut-in)  Casing Pressure  OIL CONSERVATION DIVISION  MAR 1 9 1990  Date Approved  Drig. Signed by  Paul Kautz  Geologist  Drig. Signed by  Paul Kautz  Geologist  Orig. Signed by  Paul Kautz  Geologist		glead Gas or Dry  Ll. 94 FFFECTIV	/E: Februs	Address (City	STION		сору ој ти је	WM IS 10 DE SE		
Designate Type of Completion - (X)  Date Spudded  Date Compl. Ready to Prod.  Total Depth  P.B.T.D.  Top Oil/Gas Fay  Tubing Depth  Depth Casing Shoe  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE  CASING A TUBING SIZE  DEPTH SET  SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE  DIL 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 Rue To Task  Date of Test  Length of Test  Tubing Pressure  Casing Pressure  Choke Size  Valent Ford. Test - MCP/D  Length of Test  Valent Ford. Test - MCP/D  Length of Test  Tubing Pressure (Shut-in)  Casing Pressure (Shut-in)  Oil CONSERVATION DIVISION  MAR 1 9 1990  Date Approved  Dat	well produces oil or liquids, ve location of tanks.	Unit   Sec.   Twp.	132	le gae actually	connected?	When	7			
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Date Spedded  Date Compl. Ready to Prod.  Total Depth P.B.T.D.  Top Oil/Gas Pay  Tubing Depth Depth Casing Shoe  TUBING, CASING AND CEMENTING RECORD  HOLE SIZE CASING & TUBING SIZE DEPTH SET SACKS CEMENT  V. TEST DATA AND REQUEST FOR ALLOWABLE DIL 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.)  Dete First New Oil Run To Tank Date of Test  Length of Test Tubing Pressure  Casing Pressure Choke Size  GAS WELL Actual Prod. During Test Oil - Bibls.  GAS WELL Actual Prod. Test - MCF/D  Length of Test Tubing Pressure (Shut-in)  Total Depth P.B.T.D.  Total Depth P.B.T.D.  Total Depth Tot			Gas Well	New Well	Workover	Doepen	Plug Back	Same Res'v	Diff Res'v	
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HOLE SIZE  CASING & TUBING SIZE  DEPTH SET  SACKS CEMENT  ACKS ACKS ACKS ACKS ACKS ACKS ACKS ACKS	erforations						Depth Casin	ng Shoe		
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DIL WELL  (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth of be for full as how 1.)  Date of Test  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Casing Pressure  Choke Size  Casing Pressure  Choke Size  Gas-MCF  GAS WELL  Actual Prod. Test - MCF/D  Length of Test  Design Pressure (Shut-in)  Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Testing Method (pitot, back pr.)  Tubing Pressure (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 complied with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  Orig. Signed by  Paul Kautz  Geologist	HOLE SIZE	CASING & TUBING SIZE		DEPTH SET				SACKS CEMENT		
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Length of Test			a ou una musi	Producing N	1ethod (Flow, p	ump, gas lift,	eic.)			
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Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Tubing Pressure (Shut-in)  Casing Pressure (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 complied with and that the information given above is true and complete to the best of my knowledge and belief.  Date Approved  Orig. Signed by Paul Kautz  Geologist	Actual Prod. During Test	Oil - Bbis.		Water - Bbls.			Gas- MCF			
Testing Method (pitot, back pr.)  Tubing Pressure (Shut-in)  Casing Pressure (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 complied with and that the information given above is true and complete to the best of my knowledge and belief.  Signature  Signature  Orig. Signed by Paul Kautz  Geologist	GAS WELL									
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Signature Signature SHARON 1-11 PRIN ANALYST By Orig. Signed by Paul Kautz Geologist	Division have been complied with a	nd that the information given abo	ove	Da						
Signature Geologist SHARON HILL PROD ANALYST	521il									
Printed Name  3-14-90	SHARON HILL	PROD ANA	1L.YS.7							
Telephone No.	Printed Name	11110 (2.2.3.76)(2.0)	ne No		l <del>0</del>					

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.

RECEIVED

MAR 1 6 1990

OCD HOBB'S OFFICE