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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Antesia, NM 88210

State of New Mexico Minerals and Natural Resources Department Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazes Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

•						Well Al	No.		
Operator GREAT WESTERN DRILL	TNG COM	PANY	*						
Address	JING COL	2411							****
	LAND, TX	79702							
Reason(s) for Filing (Check proper box)				Other	Please explair	1)			
New Well		hange in Trai	- []						
Recompletion \square	Oil Casinghead (idensate						•
Change in Operator	Campneau C								
f change of operator give name and address of previous operator							<u> </u>		
I. DESCRIPTION OF WELL	AND LEAS	E		·		T			
Lesse Name	V	Vell No. P∝	ol Name, Includin	-	~	Kind of	Lease edoral or Fee	Lei	isa No.
McQuien		2	<u>Carter Sa</u>	n Andrea	<u>, so.</u>	XXXX	XXXXX		
Location	16	E0	<u></u> .	N Linea	nd 2310			W	• •
Unit LetterF	_ : <u></u>	50 Fe	a From The	N Line a		ree	t From The		Line
Section 8 Township	p 18−S	Ra	nge <u>39-</u> E	, NM	PM, Lea	L			County
300000									
II. DESIGNATION OF TRAN	SPORTER	OF OIL	AND NATUI	RAL GAS	addaga to subi	ah annanad	aanu af thia faa	_ (a ta ka a	
ame of Authorized Transporter of Oil XX or Condensate				Address (Give address to which approved copy of this form is to be sent) P.O. Box 5568 Denver, Colorado 80217					
Texaco Trading and Transportation, Inc.				Address (Give address to which approved copy of this form is to be seet)					
Name of Authorized Transporter of Casing	mnant/			Frank Ph					
Phillips Petroleum Go	Wuil.	W 498 C	o rporation /p. Rgc.	Is gas actually		When			
If well produces oil profession of the Procession of the Processio	F	8 118	8-S 39-E	ye		l Oct	ober 195	57	
If this production is commingled with that	from any other	r lease or poo	l, give commingli	ing order numbe	ır.				
IV. COMPLETION DATA			1 0 - 31-11	Nous Wall	Watawa	- Parent	D D	'ama Baa'u	him been
Designate Type of Completion	- (X)	Oil Well	Gas Well	New Well	WORKOVER	Doepen	Plug Back S	ame Kes v	Diff Resiv
Date Spudded		Ready to Pr	od.	Total Depth		L	P.B.T.D.		
Date Sproces		·					*		
Elevations (DF, RKB, RT, GR, etc.)	Name of Pro	ducing Form	ation	Top Oil/Gas P	ay ·	•	Tubing Depth	1	
					· · · · · · · · · · · · · · · · · · ·		Depth Casing	Shoe	
Perforations			•				Lepii Casing	Silve	
	<u> </u>	IRING C	ASING AND	CEMENTIN	G RECOR	D	<u>.1</u>		
HOLE SIZE	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT		
HOLE SIZE		Onding a round dist							
							<u> </u>		
					·		ļ		
		T T COULT	N C	<u> </u>			<u> </u>		
V. TEST DATA AND REQUE	ST FOR A	LLUWAL	LE load oil and must	he equal to or	exceed top all	owable for the	is denth or he fo	or full 24 hou	ze)
IL WELL (Test must be after recovery of total volume of load out and must let First New Oil Run To Tank Date of Test			t be equal to or exceed top allowable for this depth or be for full 24 hours.) Producing Method (Flow, pump, gas lift, etc.)						
Date First New Oil Run 10 Tank	Date of Tex						•		
Length of Test	Tubing Pres	Tubing Pressure		Casing Pressure			Choke Size		
Actual Prod. During Test	Oil - Bbls.		Water - Bbis.			Gas- MCF			
				J			<u> </u>		
GAS WELL				Int. Carden	0.0.4CE		10		
	Length of Test			Bbls. Condensate/MMCF			Gravity of Condensate		
Actual Prod. Test - MCF/D	2025			ı					
			n)	Casing Press	ire (Shut-in)		Choke Size		
Actual Prod. Test - MCF/D Testing Method (pitot, back pr.)		ssure (Shut-i	n)	Casing Press	ire (Shut-in)		Choke Size		
Testing Method (pilot, back pr.)	Tubing Pre	ssure (Shut-ii		<u> </u>					
Testing Method (pitot, back pr.) VI. OPERATOR CERTIFIC	Tubing Pre	ssure (Shut-ii	LANCE	<u> </u>		NSERV	Choke Size	DIVISIO	ON
Testing Method (pitot, back pr.) VI. OPERATOR CERTIFIC I hereby certify that the rules and regression have been complied with an	Tubing Pre	COMPI	LIANCE	<u> </u>		NSERV	ATION I	DIVISIO P 28'9	
Testing Method (pitot, back pr.) VI. OPERATOR CERTIFIC	Tubing Pre	COMPI	LIANCE		OIL COI		ATION I		
Testing Method (pitot, back pr.) VI. OPERATOR CERTIFIC I hereby certify that the rules and regression have been complied with an	Tubing Pre	COMPI	LIANCE				ATION I		
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Testing Method (pitot, back pr.) VI. OPERATOR CERTIFIC I hereby certify that the rules and regr Division have been complied with an is true and complete to the best of my	Tubing Pre	COMPI Oil Conservarination given	IANCE tion above	Date	OIL COI	ed	ATION SEI	P 28'9	
Testing Method (pitot, back pr.) VI. OPERATOR CERTIFIC I hereby certify that the rules and regr Division have been complied with an is true and complete to the best of my Signature Carol Finkle Proceedings	Tubing Pre CATE OF ulations of the d that the infor y knowledge an	COMPI Oil Conserva	IANCE tion above above	Date	OIL CON Approve ORIGINA	ed	ATION SEI	P 28'9	
Testing Method (pitot, back pr.) VI. OPERATOR CERTIFIC I hereby certify that the rules and regr Division have been complied with an is true and complete to the best of my Signature Carol Finkle Proc	Tubing Pre CATE OF ulations of the d that the infor y knowledge an	COMPI Oil Conserva	IANCE tion above above	Date By_	OIL CON Approve ORIGINA	ed	ATION SEI	P 28'9	

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.

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