Submit 5 Copies
Appropriate District Office
DISTRICT 1
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

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410					1exico 875						
I.	REQ				BLE AND			t			
I. TO TRANSPORT OIL AND NATURAL GA							Wel	Well API No. 30-025-30583			
Address P. O. Box 769			exas	7571	1			023=3(			
Reason(s) for Filing (Check proper box)						er (Please exp	lain)				
New Well Recompletion	Oil	Change in	Transpo Dry Ga			•	•				
Change in Operator	Casinghe		Conden								
If change of operator give name and address of previous operator	<u></u>	<del></del>									
II. DESCRIPTION OF WELL Lease Name											
FEDERAL "P"		Well No.			lains-Upper Bone			Kind of Lease NM-03928			
Location D	, 6	60		N	-	rings	660				
Unit Letter	1.0		Feet Fr		orth Lin	e and	<u>660</u> 1	Feet From The	West	Line	
Section 24 Townsh			Range	32	, INI	МРМ,	<del></del>	Lea	—	County	
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	SPORT	AT DE ON	Tam	<b>DOMESTU</b>	RAL GAS						
Enron Oil Trading & Transportation Company					Box 228	e address to w 88. Houst	<i>hich approve</i> Ton Te	as 77251-1188			
Name of Authorized Transporter of Casinghead Gas Or Day Gas TVV					Addman (C)						
If well produces oil or liquids, give location of tanks.	nillips 66 Natural Gas Company GPM Gas Corporationary well produces oil or liquids,   Unit   Sec.   Twp.   Rge.   Is gas a					s gas actually connected? When ?				<del></del>	
If this production is commingled with that	from any orb	24	18S	32E	Yes	:	i	May 17,	1989		
IV. COMPLETION DATA			givi	- conuning	ing order num	er:	No	<del></del>	<del></del>		
Designate Type of Completion	- (X)	Oil Well	G	as Well	New Well	Workover	Deepen	Plug Back  S	ame Res'v	Diff Res'v	
Date Spudded	Date Compl. Ready to Prod.				Total Depth			P.B.T.D.		٠	
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth	Tubing Depth		
Perforations									Depth Casing Shoe		
		TIRING (	CACINI	CAND	OE) (E) (OE)						
TUBING, CASING AN HOLE SIZE CASING & TUBING SIZE						DEPTH SET	D	SACKS CEMENT			
			<del></del>								
										<del></del>	
V. TEST DATA AND REQUES	T FOR A	LLOWA	BLE								
OIL WELL (Test must be after re Date First New Oil Run To Tank	t be equal to or exceed top allowable for this depth or be for full 24 hours.)  Producing Method (Flow, pump, gas lift, etc.)										
Length of Test	Date of Test						np, gas iyi, i	elc.)			
	Tubing Pressure				Casing Pressure	e		Choke Size	Choke Size		
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gas- MCF	Gas- MCF		
GAS WELL					<del></del>		· · · · · · · · · · · · · · · · · · ·	<u> </u>	<del></del>		
tual Prod. Test - MCF/D Length of Test					Bbls. Condensate/MMCF			Gravity of Condensate			
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choka Cia	Choke Size		
/I OPERATOR OFFI								Cloke Size	Cloud Size		
I. OPERATOR CERTIFICAL I hereby certify that the rules and regulat	ions of the O	il Conserva	ion	E	0	IL CON!	SERV	ATION DI	VISIO	NI	
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					OIL CONSERVATION DIVISION						
My don hamb					Date Approved						
Signature					Ву						
Gaylon/Thompson Engr. Oprns. Secretary Printed Name Title											
January 24, 1991 (903) 561-2900  Date Telephone No.					Title						
		rechin	14U,	- 11							

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.