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

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

State of New Mexico Energy, 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

TO TRANSPORT OIL AND NATURAL GAS  Veil AVINS. PETROLEUM CORPORATION  Addres  105 South 4th St., Attesta, NM 88210  Reason for Filling (Cuber proper loss)  Now Wall  Change in Transporter of CORRECT POOL NAME  OIL Dy Gas  Change in Operator  OIL Dy Gas  Change in Operator  OIL Dy Gas  Change in Operator  OIL Dy Gas  Change in Operator  Change in Operator  OIL Dy Gas  Change in Operator  Change in Operator  OIL Dy Gas  Change in Operator  Change in Operator  OIL Dy Gas  OIL Dy Gas  Change in Operator  OIL Dy Gas  OIL Change in Operator  OIL Dy Gas  OIL Change in Operator  OIL Change in Ope	000 Rio Brazos Rd., Aztec,	NM 87410	REQU	EST FC	R AL	LOWAB	LE AND A	UTHORIZ	ZATION				
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Lease Name   Well No.   Pool Name, Including Formation   South   Line and   State   Louisian   Line land   Line and   Line and   State   Line an	•		ND LEA	ASE							<u>-</u>		
Location	ease Name Well No. Pool Name, Includir						A State E			of Lease Fiederal or Fee	Maril on Too		
Unit Letter I 1650 Feet From The SOUTH Line and 330 Feet From The EASE LI  Section 9 Township 188 Range 35E NMPM, Lea County  TII. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authorized Transporter of Oil Control Cark  Name of Authorized Transporter of Oil Control Cark  Name of Authorized Transporter of Category of this form is to be sent)  P. O. Box 2528 — Hobbs NM 88240  P. O. Box 2528 — Hobbs NM 88260  If well produces oil or liquids, P. O. Box 1689 — Loydington, NM 88260  If well produces oil or liquids, P. O. Box 1689 — Loydington, NM 88260  If well produces oil or liquids, P. O. Box 1689 — Loydington, NM 88260  If well produces oil or liquids, P. O. Box 1689 — Loydington, NM 88260  If set actually connected? When 7  When 7  Personation of twish. P. O. Box 1689 — Loydington, NM 88260  If set actually connected?  When 7  When 7  Personation of twish. P. O. Box 1689 — Loydington, NM 88260  If set actually connected?  When 7  Personation of twish. P. O. Box 1689 — Loydington, NM 88260  If set actually connected?  When 7  Personation of twish. P. O. Box 1689 — Loydington, NM 88260  If set actually connected?  When 7  Personation of twish. P. O. Box 1689 — Loydington, NM 88260  If set actually connected?  When 7  Personation of twish. P. O. Box 1689 — Loydington, NM 88260  It set actually connected?  When 7  Personation of twish. P. O. Box 2528 — Hobbs, NM 88260  When 7  Personation of twish. P. O. Box 2528 — Hobbs, NM 88260  When 7  Personation of twish. P. O. Box 2528 — Hobbs, NM 88260  When 7  Personation of twish. P. O. Box 2528 — Hobbs, NM 88260  When 7  Personation of twish. P. O. Box 2528 — Hobbs, NM 88260  When 7  Personation of twish. P. O. Box 2528 — Hobbs, NM 88260  When 7  Personation of twish. P. O. Box 2528 — Hobbs, NM 88260  P. O. Box 2528 — Hobbs, NM 88260  When 7  Personation of twish. P. O. Box 2528 — Hobbs, NM 88260  P. O. Box 2528 — Hobbs, NM	Nowata AGR Stat	:e		2	Mic	d Vacuum	i Bone Si	oring			E-/6	153	
Section 9 Township 18S Range 35E NMPM. Lea Country  III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS  Name of Authoritor's Transporter of Oil Silvent of Condensate P. Address (Give address to which approved copy of this form is so be sent)  Tex-New Mex Pipel Ine  Name of Authoritor's Transporter of Cataghead Gas  Varien Petroleum Corporation  Tex-New Mex Pipel Ine  Name of Authoritor's Transporter of Cataghead Gas  Warren Petroleum Corporation  Very Popel of Oil Guided,  P 9 18S 35E Yes 1 spast acting concessed?  When P 9 18S 35E Yes 1 spast acting concessed?  When P 6-23-93  If this production is comminging with that from any other lease or pool, give comminging or or number:  V. COMPLETION DATA  Designate Type of Completion - (X)  Oil Well Gas Well New Well Workover Deepen Plug Back Same Rery Diff Res  Date Spudded  Date Compl. Ready to Prod.  Total Depth  Date Spudded  Date Compl. Ready to Prod.  Total Depth  Elevations (DF, RAS, RT, GR, etc.)  Name of Producing Formation  Top Oil/Gas Pay  Tubing Depth  Casing Size  DEPTH SET  SACKS CEMENT  Tubing Pressure  Choke Size  TUBING, CASING AND CEMENTING RECORD  Date Fire New Oil Run To Tank  Date of Tex  Tubing Pressure  Choke Size  Tubing Method (plios, back pr.)  Tubing Pressure  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  Investy Kile in Production Clerk  Production Clerk  Production Clerk  Tubing Method (plios, back pr.)  Tubing Pressure (Shut-in)  Date Approved  FEB 28 1994  By  OSCIGINAL SIGNED BY JERRY SEXTON  DISTRICT I SUPERNSON		т	1650	1		. <b>-</b> Sc	outh	33	0 5.	at Emm The	East	Line	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS   Name of Authorized Transporter of Oil	Unit Letter		Feet From The				Line and 350 Fee			t From the			
Name of Authorized Transporter of Oil X or Condenses Address (Give address to which approved copy of his John but a few)  Tex-New Mey Pipeline  Name of Authorized Transporter of Casinghead Gas X or Dry Gas P. Do. Box 2528 — Hobbs N. M. 88240  Name of Authorized Transporter of Casinghead Gas X or Dry Gas Do. Box 2528 — Hobbs N. M. 88240  P. O. Box 2528 — Hobbs N. M. 88240  P. O. Box 2528 — Hobbs N. M. 88240  P. O. Box 2528 — Hobbs N. M. 88260  If well produces oil or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well produces oil or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well produces oil or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well produces oil or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well produces oil or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well produced or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well produced or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well produced or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well or liquids, P. O. Box 1689 — Lovington Rev. P. O.	Section 9	Township	185		Range	35E	, NI	ирм,	Lea			County	
Name of Authorized Transporter of Oil X or Condenses Address (Give address to which approved copy of his John but a few)  Tex-New Mey Pipeline  Name of Authorized Transporter of Casinghead Gas X or Dry Gas P. Do. Box 2528 — Hobbs N. M. 88240  Name of Authorized Transporter of Casinghead Gas X or Dry Gas Do. Box 2528 — Hobbs N. M. 88240  P. O. Box 2528 — Hobbs N. M. 88240  P. O. Box 2528 — Hobbs N. M. 88240  P. O. Box 2528 — Hobbs N. M. 88260  If well produces oil or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well produces oil or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well produces oil or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well produces oil or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well produces oil or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well produced or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well produced or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well produced or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well or liquids, P. O. Box 1689 — Lovington, N. M. 88260  If well or liquids, P. O. Box 1689 — Lovington Rev. P. O.	II. DESIGNATION	OF TRANS	PORTE	R OF O	L AN	D NATU	RAL GAS						
Name of Authorized Triansporter of Casinghead Gas Warren Petroleum Corporation Used Description Warren Petroleum Corporation Well See. Twp. Rec. P. D. Box 1689 – Lovington, NM 88260 When 7 When 7 When 7 Well Wend Verse Deepen Piug Back Same Res'v Diff Res Well Workover Deepen Piug Back Same Res'v Diff Res Follows Well Workover Deepen Piug Back Same Res'v Diff Res Follows Well Workover Deepen Piug Back Same Res'v Diff Res Follows Follows Total Depth P.B.T.D.  Total Depth P.B.T.D.	Name of Authorized Transporter of Oil X or Condensate							Address (Give address to which approved copy of this form is to be sent)					
Water Petroleum Corporation  If well produces oil or liquids, Usit Sec. Twp. Rgs. 18 gas actually connected?  If well produces oil or liquids, P 9 188 35E yes 6-23-93  If this production is commingled with that from any other lease or pool, give commingling order number:  If this production is commingled with that from any other lease or pool, give commingling order number:  If this production is commingled with that from any other lease or pool, give commingling order number:  If this production is commingled with that from any other lease or pool, give commingling order number:  If this production is commingled with that from any other lease or pool, give commingling order number:  If the production is commingled with that from any other lease or pool, give commingling order number:  If the production is commingled with that from any other lease or pool, give commingling order number:  If the production is commingled with that from any other lease or pool, give commingling order number:  If the production is commingled with that from any other lease or pool, give commingling order number:  If the production is commingled with that from any other lease or pool, give commingling order number:  If the production is commingled with that from any other lease or pool, give commingling order number:  If the post pool of the production of the pro			1.0			· Con 🗔	Address (Giv	OX 2528 • address to w	– HODDS . hich approved	copy of this fo	NM 8824U		
If well produces oil or liquids,   Dist   Sec.   TWP.   Rge.   Is gas actually connected?   Wheel   P 9   188   35E   Yes   6-23-93    If this production is commingled with that from any other lease or pool, give commingling order number:     1	Name of Authorized Transporter of Casinghead Gas X or Dry					, 045							
P   9   18S   35E   yes   6-23-93				Sec.	Twp. Rge.					<del>-</del> ' • •			
Designate Type of Completion - (X)  Date Compl. Ready to Prod.  Date Spudded  Date Compl. Ready to Prod.  Date Spudded  Date Compl. Ready to Prod.  Date Spudded  Date Compl. Ready to Prod.  Doepth Casing Depth  P.B.T.D.  Top Oil/Gat 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  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  Length of Test  Length of Test  Actual Prod. During Test  Oil - Bbls.  Gas-MCF  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.  Signiform  Rusty Klein  Production Clerk Pittle  District I supervisor	give location of tanks.	·	P	9	18S	35E	yes			6-23-	93		
Designate Type of Completion - (X)  Date Spadded  Date Compl. Ready to Prod.  Date Spadded  Date Compl. Ready to Prod.  Total Depth  P.B.T.D.  Top Gli/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  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  Date of Test  Length of Test  Actual Prod. Test - MCF/D  Length of Test  Oil - Bbis.  GAS WELL  Actual Prod. Test - MCF/D  Length of Test  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 beat of my knowledge and belief.  Signature  Rusty Riein  Production Clerk  Title  Title  Title  Total Depth  Pigle Back Same Reav  Diff Res  Pigle Approved  P.B.T.D.  PLET.D.  Depth Casing Press  PLET.D.  P	If this production is commin	gled with that fi	rom any od	ner lease or	pool, g	ive comming	ing order num	ber:				<del> </del>	
Designate Type of Completion - (X)  Date Spudded  Date Compl. Ready to Prod.  Total Depth  P.B.T.D.  Total Depth  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 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  Length of Test  Lungth of Test  Tubing Pressure  Casing Pressure  Choke Size  Choke Size  Water - Bbls.  GAS WELL  GAS WELL  GAS WELL  GAS WELL  GAS WELL  Actual Prod. Test - MCF/D  Length of Test  Oil - Bbls.  District of Test Condensate/MMCF  Gravity of Condensate  VI. OPERATOR CERTIFICATE OF COMPLIANCE 1 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.  Significant Rungs 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.  District I supervisor  Title  DISTRICT I SUPERVISOR	IV. COMPLETION	DATA		·			1		l Dans	Dive Deck	Came Des'y	Diff Res'v	
Elevations (DF, RKB, RT, GR, etc.)  Name of Producing Formation  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  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  Length of Test  Tubing Pressure  Casing Pressure  Choke Size  Choke Size  Gas-MCF  Actual Prod. Test -MCF/D  Length of Test  Oil - Bbls.  Water - Bbls.  Gas- MCF  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 compiled with and that the information given above is true, and complete to the best of my knowledge and belief.  Significant  Rusty Klein  Production Clerk Title  Title  Title  Title  Title  Title  Title  Tubing Depth  Tubing Depth  Casing Pay  Tubing Depth Casing Shoe  Total Pay  Total Depth Casing Shoe  Total Pay  Total Depth Casing Shoe  Tubing Depth  Total Depth Casing Shoe  Tubing Depth  Total Depth Casing Shoe  Total Pay  Tubing Depth  Total Depth Casing Shoe  Total Pay  Total CORD  Total Depth Casing Shoe  Total Pay  Total Depth Casing Shoe  Total Pay  Total Conservation  Date Approved  FEB 2 8 1994  Date of Test  Title  Title  Title  Title  Total Conservation  District I Supervisor	Designate Type of (	Completion -	(X)	Oil Well	1	Gas Well	New Well	Workover	Decpen	Plug Back	Same Res v	Dill Res v	
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OIL WELL  (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for into depin or be for just 24 nows.)  Date First New Oil Run To Tank  Date of Test  Date of Test  Producing Method (Flow, pump, gas lift, etc.)  Casing Pressure  Choke Size  Choke Size  Actual Prod. During Test  Oil - Bbls.  Water - Bbls.  Gas- MCF  Gas- MCF  Casing Pressure  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  FEB 2 8 1994  By  ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR	HOLE SIZE		U.F	SING & II	JBING	SIZE	<del> </del>	DEI III OE	<u>'</u>	<del> </del>			
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Date First New Oil Run To Tank  Date of Test  Length of Test  Tubing Pressure  Casing Pressure  Casing Pressure  Choke Size  Choke Size  Choke Size  Actual Prod. During Test  Oil - Bbls.  Gas- MCF  Gas- MCF  Bbls. Condensate/MMCF  Gravity of Condensate  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  FEB 2 8 1994  By  ORIGINAL SIGNED BY JERRY SEXTOR DISTRICT I SUPERVISOR	V. TEST DATA AN	D REQUES	T FOR	ALLOW	ABLI	E			loumble for th	ie denth or he	for full 24 hos	urs.)	
Length of Test  Length of Test  Actual Prod. During Test  Oil - Bbls.  Oil - Bbls.  Water - Bbls.  Gas- MCF  Gravity of Condensate  Casing Pressure  Water - Bbls.  Gas- MCF  Gravity of Condensate  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Casing Pressure (Shut-in)  Onoke 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  FEB 2 8 1994  By  ORIGINAL SIGNED BY JERRY SEXTOR  Title  Title  Title					of load	a ou ana mus	Producing N	ethod (Flow, p	oump, gas lift,	etc.)	<i>Jo. J</i> 27 to.		
Actual Prod. During Test  Actual Prod. During Test  Oil - Bbls.  Water - Bbls.  Gas-MCF  Gravity of Condensate  MMCF  Gravity of Condensate  Casing 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.  By  ORIGINAL SIGNED BY JERRY SEXTON  DISTRICT I SUPERVISOR	Date First New On Run To	1 dilk	Date of 1	CSL									
GAS WELL  Actual Prod. Test - MCF/D  Length of Test  Bbls. Condensate/MMCF  Gravity of Condensate  Choke Size  VI. OPERATOR CERTIFICATE OF COMPLIANCE  I hereby certify that the rules and regulations of the Oil Conservation Division have been complete to the best of my knowledge and belief.  Date Approved  Bbls. Condensate/MMCF  Gravity of Condensate  Choke Size  OIL CONSERVATION DIVISION  Date Approved  By  ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR	ength of Test Tubing Pr			ressure			Casing Pressure			Cnoke Size			
GAS WELL  Actual Prod. Test - MCF/D  Length of Test  Festing 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  By  ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR	Actual Bood Duning Test	Oil Phie				Water - Bhi	Water - Bbls.			Gas- MCF			
Testing Method (pitot, back pr.)   Tubing Pressure (Shut-in)   Casing Pressure (Shut-in)   Choke Size	Actual Proc. During Test		Oil - Bois										
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.  Signature  Rusty Klein  Printed Name  Title  Casing Pressure (Shut-in)  OIL CONSERVATION DIVISION  Date Approved  FEB 28 1994  Date Approved  ORIGINAL SIGNED BY JERRY SEXTON  DISTRICT I SUPERVISOR	GAS WELL												
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 Rusty Klein Printed Name  OIL CONSERVATION DIVISION  Date Approved  FEB 2 8 1994  ORIGINAL SIGNED BY JERRY SEXTON  DISTRICT I SUPERVISOR	Actual Prod. Test - MCF/D Length of Test						Bbls. Condensate/MMCF			Gravity of Condensate			
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  By  ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR  Title  Title	Tosting Method (pitot, back	ting Method (pitot, back pr.)  Tubing Pressure (Shut-in)					Casing Pres	Casing Pressure (Shut-in)			Choke Size		
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  By  ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR  Title  Title	VI. OPERATOR O	CERTIFIC	ATE O	F COM	PLIA	NCE		011 00	NOED'	/AT!	DNAC	ON.	
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  By  ORIGINAL SIGNED BY JERRY SEXTON  DISTRICT I SUPERVISOR  Title  Title	I hereby certify that the	rules and regul	ations of th	e Oil Conse	rvation	1		OIL CO	NSEHV	AHON	וופועוט	ON	
Signiphirm Rusty Klein Printed Name  Rusty Klein Printed Name  Production Clerk Title  By ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR	Division have been con	iplied with and	that the int	formation gi	ven abo	ove	. Dat	e Approv	ed	FE	B 28 19	94	
Signature Rusty Klein Printed Name Production Clerk Title  DISTRICT   SUPERVISOR Title	Kust. &	10.						- · · PP' • *	- <del> </del>				
Printed Name Title DISTRICT I SUPERVISOR	<u> </u>	pus?				<del></del>	∥ By.	ODICINI	I CICHED	RY IRDDV	CEXTON.	<del></del>	
Profiled Name : Italian   Title	Rusty Klein Production Clerk							DISTRICT I SUPERVISOR					
		1994	(	505) 7		-	Title	ə					
Date Telephone 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.
- 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.