Submit 5 Copies
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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Rover Operating, Inc.	•						1	Well API No. 30-025- 215	50 O 2	155	
Address 17618 Davenport Drive	e, Suite	1	Dalla	s, TX	75252	······································	L				
Reason(s) for Filing (Check proper box)						het (Please exp	dain)				
New Well		Change in	Тгальро	rter of:	<u> </u>						
Recompletion	Oil		Dry Gas								
Change in Operator XX	Casinghea		Conden					y 1, 1993			
f change of operator give name nd address of previous operator Pre	esidio Ex	plora	tion,	Inc.	5613 DT	C Parkway	y , Su	ite 750 Eng	lewood,	CO 801	
I. DESCRIPTION OF WELI	L AND LEA										
case Name Phillips Lea		Well No.			ing Formation			ind of Lease	L	ease No.	
ocation	<u> </u>	3	vac	uum Gr	ayburg	San Andre	es S	kate, Pederal De Fee	B41	18	
Unit LetterJ	:2310)	Feet Fro	on The	South Lin	e and16	650	_ Feet From The	East	Line	
Section 31 Towns	170		Range	34	FI.	мрм,	Lea				
						IVITIVI,			···	County	
I. DESIGNATION OF TRANS Jame of Authorized Transporter of Oil	NSPORTER XXX	or Conden	L AND	NATU	RAL GAS Address (Given	e address to w	hich appe	oved copy of this for			
Texas New Mexico Pipe			Ł		P O Box	2528 Ho	obbs,	NM 88240	n 13 10 De 3e.	nı)	
arne of Authorized Transporter of Casi	nghead Gas	XX	or Dry C	jas				oved copy of this form	n is to be se	nt)	
GPM Gas Corporation					Bartles	ville, (OK 74	4004		,	
well produces oil or liquids, Unit Sec. Twp. e location of tanks.					Is gas actually connected? When ?						
his production is commingled with that		31	175	34E	<u>yes</u>			Nov 1965	5	···	
. COMPLETION DATA	t from any oute	rease or p	ooi, give	commingi	ing order num	DET:					
Designate Type of Completion	n - (X)	Oil Well	Ga	s Well	New Well	Workover	Deepe	en Plug Back Sa	ame Res v	Diff Resiv	
te Spudded	Date Compl.	Ready to	Prod.		Total Depth	L	1	P.B.T.D.		1	
levations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth	Tuhing Denth		
erforations								lasing Deput			
U OLITIOGR								Depth Casing S	shoe		
	77	IRING (C A STAT	CAND	CEMENTO	IC DECOR					
HOLE SIZE		NG & TU			CEMENTI	NG RECOR	D		01/0 051/5		
		110 0 101	01140 012	L- L-		DEP IN SET		SAC	CKS CEME	.N.T	
	ı										

TECT DATA AND DECAME											
						4.4					
L WELL (Test must be after t	recovery of tota							this depth or be for	full 24 hours	r.)	
L WELL (Test must be after t						exceed top allo thod (Flow, pu			full 24 hours	r.)	
L WELL (Test must be after re e First New Oil Run To Tank	recovery of tota	i volume o				thod (Flow, pu			full 24 hours	r.)	
L WELL Test must be after ree First New Oil Run To Tank	Date of Test	i volume o			Producing Me	thod (Flow, pu		ift, etc.)	full 24 hours	r.)	
L WELL Test must be after ree First New Oil Run To Tank gth of Test	Date of Test	i volume o			Producing Me	thod (Flow, pu		ift, etc.)	full 24 hours	r.)	
L WELL (Test must be after refer ref	Date of Test Tubing Press	i volume o			Producing Me	thod (Flow, pu		Choke Size	full 24 hours	r.)	
L WELL Test must be after referst New Oil Run To Tank gth of Test ual Prod. During Test AS WELL	Date of Test Tubing Press	l volume o			Producing Me	thod (Flow, pu		Choke Size		r.)	
L WELL Test must be after refer to the First New Oil Run To Tank agth of Test Lai Prod. During Test AS WELL Liai Prod. Test - MCF/D	Date of Test Tubing Press Oil - Bbis.	l volume o	f load oil		Producing Me Casing Pressu Water - Bbis.	thod (Flow, pu		Choke Size Gas- MCF		r.)	
L WELL (Test must be after ree First New Oil Run To Tank gth of Test ual Prod. During Test AS WELL ual Prod. Test - MCF/D	Date of Test Tubing Press Oil - Bbls.	l volume o	f load oil		Producing Me Casing Pressu Water - Bbis.	thod (Flow, put		Choke Size Gas- MCF		r.)	
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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.