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

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

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

Santa Fe, New Mexico 87504-2088

| I. | | | | | | | | IZATION | | | | |
|---|--|----------------|------------------------|--|--|---------------------------------|--------------------|-------------------------------------|-----------------------|---------------------------------------|---------------------------------------|--|
| Operator | | | | וט וחכ | LAND | NAIL | JRAL G | | API No. | | | |
| TEAM EXPION | 4TION | Inc | Ξ, | | | | | | | | | |
| Address 310 West | Illin | .oīs | | Suit | te 2 | 20 | Mid (Please exp | IAND | Τ× | 79701 | | |
| Reason(s) for Filing (Check proper box) | | | | | | Other | (Please exp | lain) | | | | |
| New Well | Oil | Change in | Transpor | | | | | | | | | |
| Change in Operator | Casinghead | d Gas | Conden | | | | | | | | | |
| | UTHER | | c Nee | | 31 | U V | J. III | nois S | vite 22 | o midl | Ano Tx | |
| II. DESCRIPTION OF WELL | AND LEA | SE | | ' | | | | | | | 79701 | |
| Lease Name | | Well No. | | me, Includ | | | | | of Lease | | ease No. | |
| Len "KN" Sta | HE | 1 | M | lioum | y At | 30 <u> </u> | | State; | Federal or Fee | 06- | 3931 | |
| Unit Letter A | . 9 | 90' | Feet Fro | om The N | Jorth | I ine a | nd 33 |) O I | eet From The _ | EAST | Line | |
| 12 | - | <u> </u> | | | | | | | | , , , , , , , , , , , , , , , , , , , | | |
| Section Townshi | p 17. | ٥ | Range | 3 ' | 16 | , NMP | М, | Le | A | · . | County | |
| III. DESIGNATION OF TRAN | | | | NATU | | | | | | | | |
| Name of Authorized Transporter of Oil or Condensate Sun Refining And MARKETING | | | | | Address (Give address to which approved P.O. Box 2039, T. | | | | USA OK 74102 | | | |
| Name of Authorized Transporter of Casinghead Gas or Dry Gas | | | | | Address (Give address to which approved copy of this form is to be sent) | | | | | | | |
| | 1 | | ı | 1 | <u> </u> | | | | _ | | | |
| If well produces oil or liquids, give location of tanks. | Unit | | | | Is gas ac | Is gas actually connected? When | | | | ? | | |
| If this production is commingled with that | | r lease or | pool, give | <u>. </u> | ling order | | | | | | | |
| IV. COMPLETION DATA | | 1 | | | , | | | | | | | |
| Designate Type of Completion | - (X) | Oil Well | G | as Well | New W | /ell V | Vorkover | Deepen | Plug Back | Same Res'v | Diff Res'v | |
| Date Spudded | Date Compl | Ready to | Prod. | ···· | Total De | pth | | 1 | P.B.T.D. | | <u> </u> | |
| Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation | | | | | Top Oil/Gas Pay Tubi | | | | | | | |
| | | | | | | | | | Tubing Depth | | | |
| Perforations | | | | | | | | Depth Casing Shoe | | | | |
| | 71 | JBING. | CASIN | G AND | CEMEN | ITING | RECOR | D | | | | |
| HOLE SIZE | TUBING, CASING AND CASING & TUBING SIZE | | | | DEPTH SET | | | | SACKS CEMENT | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | <u> </u> | | | |
| | | | | | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| V. TEST DATA AND REQUES | | | | | | | | | | | | |
| OIL WELL (Test must be after red) Date First New Oil Run To Tank | Date of Test | | of load oi | l and must | | | | owable for this imp, gas lift, e | | or full 24 hour | rs.) | |
| | D 200 100 | | | | | , . | (2 to) p. | 451 9 0 3-1 C | , | | | |
| Length of Test | Tubing Pressure | | | | Casing Pressure | | | | Choke Size | | | |
| Actual Prod. During Test | Oil - Bbls. | ril - Bbls. | | | | Water - Bbls. | | | | Gas- MCF | | |
| | | | | | | | | | | | | |
| GAS WELL | | | | | | | | | | | | |
| Actual Prod. Test - MCF/D Length of Test | | | | | Bbis. Condensate/MMCF | | | | Gravity of Condensate | | | |
| sting Method (pitot, back pr.) Tubing Pressure (Shut-in) | | | | Casing Pressure (Shut-in) | | | | Choke Size | | | | |
| | | | | | | | | | i | | | |
| VI. OPERATOR CERTIFICA | | | | CE | ! | OII | CON | SERV | | UNISIO | NI. | |
| I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above | | | | | | OIL CONSERVATION DIVISION | | | | | | |
| is true and complete to the best of my knowledge and belief. | | | | | Da | ate A | pproved | d | APR (| 9 1991 | Ì | |
| MUVA | / | | | | | | • | | | | - | |
| Signature 41. | | | | | Ву | ' | | | BY JERRY | | | |
| Michael L. Printed Name | PIERCE | | <i>Ageu</i> - Title | / | | 1 - | ė. | | | | | |
| 3/25/91 Date | 57 | 5- 39 Telen | 2-191 | 1 | lit | le | AUT. | | | · | | |

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.