| Submit 5 Copies Appropriate District Office DISTRICT I P.O. Box 1980, Hobbs, NM 88240 DISTRICT II | | | , Minerals | and Na | ew Mexico tural Resources Departm ATION DIVISIO | | | Form C-104 Revised 1-1-89 See Instructions at Bottom of Page | |
|--|----------------|---|-----------------------|---------------------------|--|----------------------------------|-------------------------------------|---|--|
| P.O. Drawer DD, Anesia, NM 88210 DISTRICT III | | | | Р.О. В | ox 2088 Texico 87504-2088 | | | | |
| 1000 Rio Brazos Rd., Aztec, NM 8741 I. | REC | REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS | | | | | | | |
| Operator | | | | | AND NATURAL G | | API No. | | |
| Devon Energy Corpora Address |) | | 3002521857 | | | | | | |
| 1500 Mid-America Tow Reason(s) for Filing (Check proper box New Well | ver, 20) | | | | noma City, OK 73 | 3102 ainj | | | |
| Recompletion | | Casinghead Gas Condensate | | | | | | | |
| and address of previous operator HON | | | Co. P | . O. E | Sox 2203, Roswell | L, NM 8 | 88202 | | |
| II. DESCRIPTION OF WEL Lease Name | L AND LE | | Port Na | ma Inclusi | ing Formation | | | | |
| Mescalero Ridge Un: Location | lt 26 | 3 | Pea | irl Que | een | | of Lease , <u>Federal</u> or Fee | Lease No. NM055194452 | |
| Unit LetterO Section 26 Town | | | | | | 9 [.] 80 F | eet From The | EastLine | |
| | | | Ratige | | 4E , NMFM, | Lea | | County | |
| III. DESIGNATION OF TRA Name of Authorized Transporter of Oil | <u>NSPORT</u> | OF OF OF OF | OIL ANI lensale | <u>) natu</u> | RAL GAS Address (Give address to wi | hich approved | d copy of this for | n is to be sent) | |
| NONE ~ WIW Name of Authorized Transporter of Cas NONE | inghead Gas | | or Dry C | Gas | Address (Give address to wi | | | | |
| If well produces oil or líquids, give location of tanks. | Unit | Sec. | Twp. | Rge. | Is gas actually connected? | When | ? | | |
| If this production is commingled with the IV. COMPLETION DATA | at from any of | ther lease o | or pool, give | commingi | ing order number: | | | | |
| Designate Type of Completion - (X) | | | | | New Well Workover | Deepen | Plug Back Sa | me Res'v Diff Res'v | |
| Date Spudded | | pl. Ready | 10 Prod. | | Total Depth |] | P.B.T.D. | l | |
| Elevations (DF, RKB, RT, GR, etc.) | Name of 1 | Producing | Formation | | Top Cil/Gas Pay | | Tubing Depth | | |
| Perforations | forations | | | | | | Depth Casing Shoe | | |
| | | | | ····· | | | Depth Casing S | noe | |
| HOLE SIZE | CA | IUBINC ASING & T | J, CASIN TUBING SI | <u>G AND</u> ze | CEMENTING RECOR DEPTH SET | D | SACKS CEMENT | | |
| | | | | | | | | | |
| V. TEST DATA AND REQUI | EST FOR | ALLOW | ABLE | | | | | | |
| OIL WELL (Test must be after Date First New Oil Run To Tank | Date of Te | otal volum st | e of load oil | and must | be equal to or exceed top allo Producing Method (Flow, pu | wable for thi mp, gas lift, e | s depth or be for , etc.) | full 24 hours.) | |
| Length of Test | Tubing Pr | essure | | | Casing Pressure | | Choke Size | | |
| Actual Prod. During Test | Oil - Bbls. | ··· | <u> </u> | | Water - Bb.s. | | Gas- MCF | | |
| GAS WELL Actual Prod. Test - MCF/D | Length of | <u>المحرب</u> | | | | | | | |
| Testing Method (pitol, back pr.) | Tubing Pro | | | | Bbls, Condensate NMCF | | Gravity of Condensate | | |
| | | | , | | Casing Pressure (Snuta) | | Clioke Size | | |
| 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 | | | | OIL CONSERVATION DIVISION | | | | | |
| is true and complete to the best of my knowledge and belief. | | | | | Date ApprovedJUL 0 8 '92 | | | | |
| Signature J. M. Duckworth Operations Managor Printed Name | | | | | By Paul Kautz Title Geologist | | | | |
| Date | 405/235 | Tel | ephone No. | | Title | Geol | OR ler | | |
| INSTRUCTIONS: This for | m is to be | filed in . | | | | | A ST SALES AND A DOWN | where a more thank that we appropriate for the | |

- INSTRUCTIONS: This form is to be filed in compliance with Rule 1104
 Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111. All sections of this form must be filled out for allowable on new and recompleted wells.
 Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
 Separate Form C-104 must be filed for each pool in multiply completed wells.