— 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

perator						i i	I API No.			
A.E.N. Energy, Inc	с.					30)-025-26494			
idress			70604							
P.O. Box 3883, Ab	ilene, Te	xas	79604		<u> </u>					
eason(s) for Filing (Check proper box)				Othe	t (Please expla	ain)				
ew Well			Fransporter of:							
ecompletion	Oil		Dry Gas							
hange in Operator	Casinghead Ga	5 📙	Condensate	T	n n ===	מלמך.	Hobba NIM	<u> ፱፻// </u>		
change of operator give name Lyn	x Petrole	eum C	onsultants	, inc., i	.u. box	19/9,	Hobbs, NM	00240		
•										
DESCRIPTION OF WELL A							 		N-	
ease Name	We	_ !	Pool Name, Includ		l am		id of Lease te, Federal of Fee	Lea	ise No.	
V.F. Cox		1	Knowles S	., Devon	Län		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
ocation	1000			North	100	Λ	τ.	Vest		
Unit LetterF	.:		Feet From The _	NOL LII	and	····	Feet From The	100L	Lin	
1.2	17 C		Range 38-	F		Lea			C	
Section 13 Township	, 17-S		Range 30-	т , N N	IPM,	uca			County	
				IDAT CAC						
I. DESIGNATION OF TRANS				RAL GAS	address to	hick areas	ved copy of this form	is to be see	,1	
ame of Authorized Transporter of Oil	TATA I	Condens	saic		x 2281, I				-/	
antern Petroleum Corp.		777		_i			<u></u>		41	
ame of Authorized Transporter of Casing			or Dry Gas				red copy of this form 79762	s w σe ser	•)	
Phillips 66 Natural Gas	 	 .	rporation							
well produces oil or liquids,	Unit Sec	·		. Is gas actually	connected?	į Wi	nen ?			
ve location of tanks.	 	<u>13</u>	17S 38E			NA NA				
this production is commingled with that f	from any other le	ase or p	ood, give comming	gling order numb	oer:	145.7			···	
V. COMPLETION DATA	·						1 50 5 12		born :	
Decignate Time of Completion		il Well	Gas Well	New Well	Workover	Deeper	n Plug Back Sar	ne Res'v	Diff Res'	
Designate Type of Completion				Total Danie	l	1	l DRTD		1	
ate Spudded	Date Compl. R	eady to	rTOG.	Total Depth			P.B.T.D.			
	ļ			Ton Olivera	Top Oil/Gas Pay					
devations (DF, RKB, RT, GR, etc.)	Name of Produ	icing Fo	rmation	Tob Othogs	ay.		Tubing Depth			
erforations	<u>L</u>						Depth Casing SI	hne		
CII OI BUILDIA							Depair Casing Si			
	7717	אומ	CASING AND	CEMENITE	NG PECOF	D				
LIGHT OUT			CASING AND	CENTENTI			SAC	KS CEME	NT	
HOLE SIZE	CASIN	5 & IU	IBING SIZE	 	DEPTH SET		SAC	A O CIVIE		

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. TEST DATA AND REQUES	T FOR ALL	OWA	ABLE	1						
_				st be eaual to or	exceed top all	lowable for	this depth or be for f	full 24 how	s.)	
Date First New Oil Run To Tank	Date of Test	seer NG	-, on area rille		ethod (Flow, p				· · · · · · · · · · · · · · · · · · ·	
					1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1	, , , ,	, ,			
ength of Test	Tubing Pressur	re		Casing Press	Casing Pressure			Choke Size		
-										
Actual Prod. During Test	Oil - Bbls.			Water - Bbis.	Water - Bbls.			Gas- MCF		
-										
GAS WELL	J									
GAS WELL Actual Prod. Test - MCF/D	Length of Test			Rhie Conde	sate/MMCE		Tombo at Car	laneste		
rion rot mori	Tongui or I cor		Bbls. Condensate/MMCF			Gravity of Cond	Gravity of Condensate			
ting Method (pitot, back pr.) Tubing I		ng Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size		
ming months (part) than pr. /			_,	Castage 1 10000	(Olion-111)		CION OUR			
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I. OPERATOR CERTIFIC		_		(USER	VATION DI	VISIO	N	
I hereby certify that the rules and regular Division have been complied with and						10LI1		-		
is true and complete to the best of my h			M BOUTE	_				: 6 19:	31	
				Date	Approve	ed			. • 1	
115 molas	•						Orig. Signed b	y,		
Signature	1			∥ By_			Paul Kautz	<u> </u>		
Signature A.E. Nelson, Jr., Pre	esident '			-, -			Geologist			
Printed Name		1070	Title -3266	Title						
October 30, 1991	915/			11116						
Date		Tele	phone 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.