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Appropriate District Office
DISTRICT 1
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

| DISTRICT II P.O. Drawer DD, Anesia, NM 88210 | OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088 | | | | | | 50 | Model of Page |
|--|---|-----------------------|-------------------------------|---------------------------------------|-----------------|------------------------------|---------------------|---------------|
| DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 874 | 10 | | | | | | | |
| I. Operator | REQUEST FOR TO TRAN | SPORT O | IL AND N | AUTHOR ATURAL C | IIZATION BAS | | | |
| Manzano Oil Corpo | 23-1996 | | | | 30-025-30409 | | | |
| P.O. Box 2107/Ros | swell, NM 88202 | -2107 | | | · | 020 00 1 | <u> </u> | |
| Reason(s) for Filing (Check proper box New Well X | | | 0 | bet (Please exp | lain) | | | |
| Recompletion | Change in Tri | easporter of: Ty Ges | | | this we | I to flare car | otained | from the |
| Change in Operator If change of operator give name and address of previous operator | Casinghead Gas Co | endensis [| | | BUREAU | OF LAND MAN | MGEMEN | (BLM) |
| II. DESCRIPTION OF WEL | L AND LEASE | | | | | | | |
| Lease Name | Well No. Po | ol Name, Inclu | ding Formstice | | Kind | of Leuc | <u> </u> | ease No. |
| Sun Pearl Federal | 11 | | Queen | | | Federal or XFX | 1 | 56263 |
| Unit Letter | :1650F | at From The | South L | 165 | 0' F | set From The | East | Line |
| Section 28 Towns | hip 19S Rau | nge 34E | | мрм, | Lea | | | County |
| III. DESIGNATION OF TRA | NSPORTER OF OIL | AND NATE | TRAL GAS | | | | | |
| Name of Amboured Transporter of Oil | CONSTRUCTION OF CONSTRUCTION | | Address (Gi | e eddress to wi | tich approved | copy of this form | is to be 21 | uni) |
| Name of Authorized Transporter of Casi | | ~ ~ ~ | P.O. [| rawer 15 | 9, Artes | sia, NM 8 | 3210 | |
| Unknown | | Dry Gus | Address (Gi | e address so wh | ich approved | copy of this form | is 10 be se | נאי |
| If well produces oil or liquids, give location of tanks. | Unit Sec. Two | 9S 134E | No | | When | 7 Jnknown | | |
| If this production is commingled with the IV. COMPLETION DATA | t from any other least or pool, | give comming | ling order num | жг: | | 71KHOWN | | |
| Designate Type of Completion | n - (X) Υ | Gas Well | New Well | Warkover | Deepen | Plug Back San | ze Kes'v | Dull Res'v |
| Due Spuided | Date Compl. Ready to Proc | | Total Depth | | | P.B.T.D. | | |
| 6/2/89 Elevations (DF. RKB, RT, GR, etc.) * | 6/26/89 | } | | 152' | | | 74' | |
| 3702' GL 3700.4 | Name of Producing Formation Pearl Queen | | Top Oil/Gas Pay 5070' | | | Tubing Depth 5101' | | |
| 5070' - 5080' | * ce | u correcti | | | 2 05 | Depth Casing Str | | |
| | TUBING, CAS | SING AND | CEMENTI | IG RECORI |) | | | |
| HOLE SIZE | CASING & TUBING | G SIZE | | DEPTH SET | | SACH | S CEME | NT |
| 12-1/4" | 8-5/8" casin | | | 1342' | | 500 sx lite + 200 sx Class (| | |
| 7-7/8" | 4-1/2" casin | ìq | | 5150' | | 1000 sx 1i | te + | 600 sx |
| | 2-3/8" tubing | | 51011 | | | 50/50 pozmix | | |
| V. TEST DATA AND REQUE | ST FOR ALLOWABLE | E | | 5101' | | | | |
| OIL WELL (Test must be after a Dute First New Oil Rus To Tank | recovery of total volume of load | d oil and must | be equal to or | xceed top allow | able for this | depth or be for ful | 124 hours | r.) |
| HE 144 ON VOW 10 1907 | Date of Test | | Producing Me | hod (Flow, pum | φ, zae lift, eu | .) | | |
| 6/26/89 Length of Test | 6/26/89 | | | umping | | | | |
| 24 hrs | Tubing Pressure | | Casing Pressu | | | Choke Size | | |
| Actual Prod. During Test | N/A Oil - Bhia | | N/ | 4 | | N/A | | |
| | 70 | | 15 | | ľ | Gas- MCF TSTM | | |
| GAS WELL | | | | | <u>-</u> | 1314 | | |
| Actual Prod. Test - MCF/D | Length of Test | ľ | Bbis. Condens | LAMM CF | | Gravity of Coadea | tile | <u></u> |
| oning Method (pilot, back pr.) | Tubing Pressure (Shut-in) | | Casing Pressur | (Shut-in) | | Snoke Size | | |
| /L OPERATOR CERTIFIC | ATE OF COLORS | NICH | | · · · · · · · · · · · · · · · · · · · | | | | |
| I hereby certify that the rules and regula | hie of complial | NCE | \cap | I CONS | SEBMY. | TION DIV | 10104 | .1 |
| Division have been complied with and to its true and complete to the best of my in | hat the information gives show | re | | | | 110 - | 1810N 989 | 4 |
| A. | 4.1 | | Date / | Approved | | | <u> ५०८</u> | <u> </u> |
| Collison (Wiggers) | | | By Orig. Signed by Poul Kentz | | | | | |
| Production Clerk | | | Geologist | | | | | |
| June 30. 1989 | 505/623-1996 | | Title_ | | | | | |

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Dide

- 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.

Telephone No.

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.