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

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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

| I. | REQU | 70 TR | OH A | CRIO | REF AND | ATURAL | RIZATION | | | | | |
|--|-------------------|----------------------------|---------------------|---------------------------------------|--|----------------------------|---------------------------------------|---------------------------------------|---------------------------------------|--|----------|--|
| Operator | L AND NATURAL GAS | | | | No. | | | | | | | |
| Mitchell Ener | | 30-025-31532 | | | | | | | | | | |
| Address | | | _ | | | | | | | - | | |
| P.O. Box 4000 Reason(s) for Filing (Check proper box) |) The Wo | oodlan | ds, | TX 773 | 387-4000 | her (Please ex | -t-t-i | · · · · · · · · · · · · · · · · · · · | | · | | |
| New Well | | Change in | Transp | corter of: | | nei (Liense ent | xavy | | | | | |
| Recompletion | Oil | | Dry C | | | | | | | | | |
| Change in Operator If change of operator give name | Casinghea | d Gas 🗌 | Conde | 1 111 | | | | | | | | |
| and address of previous operator | | | | | | | | | | | | |
| II. DESCRIPTION OF WELI | AND LE | ASE | | | | | | | | | | |
| Lease Name Well No. Pool Name, Inc. | | | | iame, Includ | ing Formation | Kind | of Lease | | Lease No. | | | |
| Geronimo Federal | | | | (Yates | -7 Rivers | 3) Su | Federal or F | | NM 67111 | | | |
| Location F | . 198 | R0 | | | Nonth | 1001 | _ | | · · · · · · · · · · · · · · · · · · · | | | |
| Unit Letter | _:: | | . Feet F | rom The | North L | ne and |) · I | ect From The | West | tLir | D6 | |
| Section 31 Towns | hip 198 | 3 | Range | 33 | E . | ІМРМ. | Lea | | | G | | |
| THE DESCRIPTION OF THE CO. | | | | | | | | * | | County | | |
| III. DESIGNATION OF TRA | NSPORTE | R OF OI or Conden | LAN | D NATU | RAL GAS | | | | | | | |
| Texaco Trading & Transportation, Inc. | | | | | Address (Give address to which approved copy of this form is to be sent) P.O. Box 60628, Midland, TX 79711-0628 | | | | | | | |
| Name of Authorized Transporter of Casi | | or Dry | Gus [| Address (Give address to which approx | | | nd, TX 79711-0628 | | | | | |
| Conoco Inc. | | | | | Address (Give address to which approved copy of this form is to be sent) 10 Desta Dr., Suite 627, Midland, TX 797 | | | | | | | |
| If well produces oil or liquids, give location of tanks. | • | 1 | | Rge | is gas actual | Is gas actually connected? | | ı 7 | | id. 11x 79705 | | |
| If this production is commingled with that | D | 31 | 198 | | <u> </u> | Yes | L | 3/: | 27/92 | ······································ | | |
| IV. COMPLETION DATA | . Hom any our | er terms or h | 2000 I, g IV | As comming | ling order sum | ber: | | | | | | |
| Declarate Transfer | | Oil Well | 7 | Gas Well | New Well | Workover | Deepen | Diug Back | Same Res'v | Diff Res'v | | |
| Designate Type of Completion Data Spudded | | X | i | | X | <u>i</u> | | Find Dates | | JAH KESV | | |
| 3/12/92 | 1 | Date Compl. Ready to Prod. | | | | Total Depth | | | P.B.T.D. | | | |
| 3/12/92 4/1/92 Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation | | | | | Top Oil/Gas | 3150' | | | 3080' | | | |
| 3570' GR | | Yates | | | | 2958' | | | Tubing Depth 2875' | | | |
| Perforations | | | | | • | | | Depth Casis | Depth Casing Shoe | | | |
| 2958-3003' | | 'DD:G | | | | | | | 3149' | | | |
| HOLE SIZE | CAS | TUBING, CASING AND | | | | | | | | | | |
| 12½" | | 8 5/8" 24# K-55 | | | DEPTH SET 534 1 | | | SACKS CEMENT 275 sx | | | | |
| 7_7/8" | 41/5" | 4½" 10.5# K-55 | | | 3149' | | | 780 sx | | | | |
| | 2 3/8 | 2 3/8" | | | 2875 ' | | | | | | \dashv | |
| . TEST DATA AND REQUE | ST FOR AL | LOWA | DIE | | | | | | | | | |
| OIL WELL (Test must be after r | ecovery of lose | d volume o | DLE Umda | il and muse | he equal to an | | | | • • • • • • | | _ | |
| | Producing Me | thod (Flow, pu | mable for this | depth or be j | or full 24 hou | rs.) | _ | | | | | |
| 4-2-92 4-4-92 | | | | | Producing Method (Flow, pump, gas lift, etc.) Pump | | | | | | | |
| Length of Test 24 Hrs. | Tubing Press | | | | Casing Pressu | TB. | | Choke Size | | | \dashv | |
| Actual Prod. During Test | Oil - Bhis | 40 Oil - Bbls. 76 | | | | 40 Water - Bbis | | | - | | | |
| | Oil - Bois. | | | | | 58 | | | Gu- MCF 35 | | | |
| GAS WELL | | | | | | | | <u> </u> | | | لــ | |
| Actual Prod. Test - MCF/D | Length of Te | st | | | Bbls. Condens | ale/MMCF | · · · · · · · · · · · · · · · · · · · | Gravity of C | On demonte | | _ | |
| | | Tubing Pressure (Shut-in) | | | | Casing Pressure (Shut-in) | | | OHOCHERUS | | | |
| esting Method (pitot, back pr.) | Tubing Press | | | | | | | | Choke Size | | | |
| T OPERATOR CERTIFIC | 1 TE OF 4 | | | | | | | | | | | |
| T. OPERATOR CERTIFIC. I hereby certify that the rules and regular | AIE OF (| COMPL | LAN(| CE | ر ا | NI CON | SERVA | TION | | AR I | | |
| 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. | | | | | Deta | Approved | 4 | APR 1 | 3 '92 | | | |
| () and Bl | | | | | Daie | יאאיייאאיי | J | | | | | |
| Signature Stone | | | | | By_ | . GINAL | SIGNED 8 | Y JERRY S | EXTON | | | |
| James Blount Engineer | | | | | -,- | 155 F 25 F | 1727 1 50 | Harry Stron | | | _ | |
| Printed Name | 0.1 | ⊤ -682- | itie 5206 | | Title_ | | | | | | | |
| Date | 91 | | -5396 one No. | | | | | | | | _ | |
| | | | | | L | | | | | | | |

- 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.