	State of New Mexico								_		
Submit 5 copies to Appropriate District Office		epartment	Form C-104 Revised 1-1-89 See Instructions								
DISTRICT I		OIL	CONS	SERVATI	ON DIV	/ISION				lottom of Page	
	obbs, NM 88240			P.O. Box 208	88						
	DD, Artesia, NM 882	10	Santa Fe	e, New Mexic	co 87504-2	088					
DISTRICT III 1000 Rio Brazos I.	Rd., Aztec, NM 8741	0 REC		ALLOWABLE A							
Operator	ACO EXPLORATION	& PRODU					We	II API No. 30	0-025-32263	3	
Address P.O	BOX 730, HOBBS, I	NM 88240									
New Well	🖂 Ch	Change in Transporter of:									
Recompletion	Oil Oil	Oil Dry Gas									
Change in Opera	or 🗌 Ca	singhead Gas	s [Condensate							
If change of operator g of previous operator	ive name and address —										
	OF WELL AND LEA	SE	Well No.	Deal Name Instud	ian Formation		Kind of	Lease State, Fede	ator Fee II ea	se No.	
· · · · ·	ETA WEST UNIT 98 VACUUM GLORI				-			ATE B-2317			
Location	Unit LetterP	_:93	7 Fee	t From The <u>S</u>	<u>OUTH</u> Line	and <u>532</u>	Feet F	from The <u>E</u>	AST	_Line	
	Section <u>35</u>	To\	wnship <u>17</u>	S	Range3	4 <u>E</u>	NMPM		LEA (COUNTY	
III. DESIGNATIO	N OF TRANSPORTE	R OF OIL A	ND NATUR	AL GAS							
Name of Authorized		Oil	\boxtimes	Condensate			ich approved c		n is to be sen	t)	
		id Gas 🔀	EW MEXICO 88240								
Name of Authorize		Address (Give address to which approved copy of this form is to be sent) P.O. BOX 3000 TULSA, OKLAHOMA 74102-3000									
If Well Produces give location of ta	oil or liquids,	Is gas actually connected? When? YES 2/6/94									
If this production is IV. COMPLETIC	commingled with that find that find that find the second sec	rom any other	lease or pool	, give commingling	order number	: 					
Designate Typ	e of Completion - ((X)	Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'	V Diff Res'v	
Date Spudded	5/94	Date Compl. Ready to Prod. 4 2/4/94				Total Depth 6269'			P.B.T.D 6135'		
Elevations (DF, RK		, GR, etc.) Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth		
GR-4007 Perforations	, KB-4021'	GLORIETA				5876'			6014' Depth Casing Shoe		
	04', 5932'-5988'; (2 JSPF, 1	· · · · · · · · · · · · · · · · · · ·							6269'		
		TUBING, CASING AND CASING and TUBING SIZE			CEMENTING RECORD			SACKS CEMENT			
11"	-= 5125	8 5/8"			1500'			650 SX, CIRC 96 SX			
7 7/8"		5 1/2"			6269'			1925 SX, CIRC 250 SX			
						<u> </u>				· · · · · ·	
OIL WELL	AND REQUEST FOR (Test must be after	recovery of t	otal volume o	of load oil and mu					or be a full 2	4 hours.)	
Date First New Oil 2/	Run To Tank 6/94	Date of Test 2-8-94			Producing Method (Flow, pump, gas lift, etc PUMPING			c.) 2.5 X 1.5 X 24			
· · · · ·	OURS	Tubing Pressure			Casing Pressure			Choke Size			
Actual Prod. During 1) Test 95	Oil - Bbls. 155			Water - Bbls. 40			Gas - MCF 33			
GAS WELL		·									
Actual Prod. Test -	MCF/D	Length of Te	st		Bbls. Condensate/MMCF			Gravity of Condensate			
Testing Method (pi	tot, back pr.)	Tubing Press	sure (Shut-in)		Casing Pressure (Shut-in) Choke Size						
I hereby certify that Division have been	CERTIFICATE OF C the rules and regulations of complied with and that the i to the pest of my knowledg	OIL CONSERVATION DIVISION									
Signature	- 5 may	Date	Approved		1						
Monte C. Dunca Printed Name	an	By DISTRICT SUPERVISOR									
2/16/94		Title_	•								
Dale	1	l eli	ephone No.		11						

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 in operator, well name or number, transporter, or other such changes

Telephone No.

4) Sepreate Form C-104 must be filed for each pool in multiply completed wells.