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

1.		IO IHAN	ISPORT OF	L AND NA	HUHAL G														
Operating, Inc.					Well API No. 30-025-0324														
Address		d Town	s 79702	· · · · · · · · · · · · · · · · · · ·															
P.O. Box 3531 Reason(s) for Filing (Check proper box)	Midlan	d, Texa	.5 /9/02	Ou	ner (Please expl	ain)													
New Well		Change in T	ransporter of:	Change in operator from Armstrong Energy					g Energy										
Recompletion	Oil	~~~~	Ory Gas	to	to Sirgo Operating effective July 1, 198														
Change in Operator	Casinghead	i Gas 🔲 C	Condensate																
If change of operator give name and address of previous operator Ar	mstrong	Energy	Corp. P	.0. Box	1973	Roswell	, New Me	xico 88	8201										
II. DESCRIPTION OF WELL	AND LEA		·					···•											
West Pearl Queen Unit Well No Pool Name, Include A Pearl Queen Unit Pearl (Queen Unit)					Visita Visitania en Casa IIII (CO)														
Unit Letter	: 60	0 F	eet From The	outh Lin	ne and _66	00 F	et From The	East	Line										
Section 29 Townsh	ip 195	R	ange 35	E ,N	MPM, L	ea			County										
					T	+		1-10	11										
III. DESIGNATION OF TRAI					_m	echor	<u>ر</u> بر ر	ell-	HCTIVE										
Name of Authorized Transporter of Oil	L]	or Condensa	·•	Address (Gi	ve address (Gw)	tuch approved	copy of this f	orm is to be se	ini)										
Name of Authorized Transporter of Casinghead Gas or Dry Gas					Address (Give address to which approved copy of this form is to be sent)														
If well produces oil or liquids, give location of tanks.	Unit Sec. Two Rge Is gas actually conne					d? When?													
If this production is commingled with that IV. COMPLETION DATA	from any other	r lease or po	ol, give comming	ling order num	ber:														
Designate Type of Completion	- (Y)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v										
Date Spudded		Ready to Po	nd nd	Total Depth	<u> </u>	<u> </u>	12222	<u> </u>											
							P.B.T.D.												
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth												
Perforations							Depth Casing Shoe												
	TI	JBING, C	ASING AND	CEMENTI	NG RECOR	D	<u> </u>												
HOLE SIZE CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT												
							GAGRO CEMENT												
	_																		
V TECT DIMI AND BEGIE																			
V. TEST DATA AND REQUE																			
OIL WELL (Test must be after to Date First New Oil Run To Tank	Date of Test		oad oil and muss					or full 24 hour	·s.)										
Date First New Oil Run 10 Tank	Producing Method (Flow, pump, gas lift, etc.)																		
Length of Test	Tubing Press	line		Casing Pressu			Choke Size												
	·																		
Actual Prod. During Test	Oil - Bbis.			Water - Bbls.			Gas- MCF												
GAS WELL	- 			l	· · · · · · · · · · · · · · · · · · ·		i												
Actual Prod. Test - MCF/D	Length of Te	કા		Bbls. Conden	ELE/MMCF		Gravity of C	Ondensale											
l'esting Method (pitot, back pr.)	Method (pitot, back pr.) - Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size												
VI. OPERATOR CERTIFIC	ATE OF	COMPLI	ANCE				l		l										
I hereby certify that the rules and regulations of the Oil Conservation				OIL CONSERVATION DIVISION															
Division have been complied with and that the information given above					1111 9 6 1000														
is true and complete to the best of my knowledge and belief.					JUL 2 6 1989														
Outin Halle					Date Approved														
Signature Softey Prod. Tech. Printed Navie 20199				ByORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR Title															
										Sale 1981	71	568	50878	''					

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.