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Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbs, NM 88240

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

## 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., Aziec, NM 87410	) DEC					viexico 87:							
I.	, HEC	TO TR	FOH /	ALLC POR	WA( اC T	IBLE AND	AUTHOR	IZATI	ON				
										II API No.			
Address P.O. Box 1150 Midland, TX 79702								30-025-04268					
Reason(s) for Filing (Check proper box)		× 1310											
New Well		Change i	in Trans	porter o	of:	∐ O:	her (Please exp	lain)					
Recompletion	Oii	ĮX.	Dry (										
Change in Operator  If change of operator give name and address of previous operator	Casinghe	ad Gas	Cond	lea sate									
II. DESCRIPTION OF WELL	AND LE	EASE					<del></del>	<del></del> -		<del></del>	<del></del>		
Lease Name  Eunice Monument South Unit B  Well No.   Pool Name, Include   SS 4   Eunice Monument   Eunice Monument   Eunice Monument   Pool Name   Poo										nd of Lease Lease No. Lease No.			
Location Unit Letter	2	310			V	1 1		——————————————————————————————————————			C +		
Section /4 Townshi		270 :0S		From Ti		ELLECT Lin	e and <u>163</u>	5 <u>0</u>	Fe	et From The	Cash	Line	
1 2042	:P	<del></del>		36E			МРМ,			Lea		County	
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil		or Conde	IL AN	ND NA	TU	RAL GAS	e address to	bick					
Shell PipeLine/Arco PipeLine						Address (Give address to which approved Box 1910, Midland, TX				l copy of this form is to be sent)  /Box 1610, Midland, TX			
Phillips Comportation was / Phillips Comportations / Warrer	ghead Gas n Pet	Gas or Dry Gas				Address (Give address to which approved				copy of this form is to be sent)			
If well produces oil or liquids,	Unit Sec. Twp.			1	Rge.	4001 Penbrook,Ode			ssa /hen	TX/Box	1589, Tul:	sa,OK	
this production is commissed with the	لِـــــلِ	<u> </u>		i		7.	1001	i_		12/11	90		
f this production is commingled with that V. COMPLETION DATA	from any oth	er lease or	pool, gi	ve com	mingli	ing order numi	ber:						
Designate Type of Completion	- (X)	Oil Well		Gas We	:II	New Well	Workover	Deepe	en l	Plug Back	Same Res'v	Diff Res'v	
Date Spudded		Date Compl. Ready to Prod.				Total Depth	<u></u> -	l		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					_	Top Oil/Gas I	ay			Tubing Depth			
Perforations							Depth Casing Shoe						
	<u>_</u>										Souce		
TUBING, CASING A HOLE SIZE CASING & TUBING SIZE					ND (	D CEMENTING RECORD							
	ONORING & FORMA SIZE					DEPTH SET				SACKS CEMENT			
					$\Box$					· · · · · · · · · · · · · · · · · · ·			
								<del></del> -					
. TEST DATA AND REQUES					L					<del></del>		·	
IL WELL (Test must be after re late First New Oil Run To Tank	Date of Tes	<u>al volume e</u> t	of load o	oil and i	must b	be equal to or a Producing Met	exceed top allow hod (Flow, pun	wable for	this o	depth or be fo	r full 24 hou	rs.)	
ength of Test										<u> </u>			
Tubing Pressure						Casing Pressure				Choke Size			
ual Prod. During Test Oil - Bbls.					1	Water - Bbls.				Gas- MCF			
GAS WELL	L	<del></del>	<del></del>							<del></del>		<del></del>	
ctual Prod. Test - MCF/D	Length of Test					Bbis. Condensate/MMCF				Gravity of Condensate			
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)					Casing Pressure (Shut-in)			,	Choke Size			
T ODED ATOD CEDTURE		001	7.4.5.		_ ,	<del></del>				<del></del>		-	
I. OPERATOR CERTIFICATION  I hereby certify that the rules and regulated Division have been complied with and the	tions of the C	Dil Conserva	ation	CE		0	IL CONS	SER	۷A			N	
is true and complete to the best of my km	owledge and	belief.				Date /	Approved		,		957	·	
J.K. Ripley						<b>D</b>							
Signature  J. K. Ripley		Tech A	ssista	ant		Ву	Pintainiai <mark>gu</mark> Chrea	GNED-	<del>BY</del>	ERRY SEX	TON	<del></del>	
Printed Name 11/11/91		7	Title			Title_	31914	5014	ura. 	RVISCR			
Date		(915)68 Telent	none No		.					<del> </del>			

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.