Submit 5 Copies
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

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 OIL CONSERVATION DIVISION P.O. Box 2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, New Mexico 87504-2088

1000 Rio Brazos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

<u>I.</u>	тТ	OTRAN	NSPORT OIL	_ AND NA	TURAL G						
Operator Zia Energy, Inc.							Well API No. 30-025-04345				
Address											
P. O. Box 2219 Reason(s) for Filing (Check proper box)	, Hobbs,	NM 88	241		ner (Please exp	-1-:-)					
New Well		Change in T	ransporter of:		iei (riease exp	nain)					
Recompletion	Oil		Ory Gas								
Change in Operator	Casinghead		Condensate 🖂	Effe	ctive 5/	/1/92					
If change of operator give name and address of previous operator											
II. DESCRIPTION OF WELL	ANDIEA	CIC.									
Lease Name	ing Formation K			Kind of Lease Le			ase No.				
Elliott Federal C				Mane, Federal MAR	KOK LC	.C-045764					
Location	2216	·		1	1.6.5						
Unit Letter	_ :2310	<u>, </u>	Feet From The	outh Lie	e and	ou	_ Feet From The		st	Line	
Section 26 Townshi	p 20 Sou	ith R	Range 36 Ea	ist , N	МРМ,	Le	a			County	
III. DESIGNATION OF TRAN	SPORTER	OF OIL	AND NATU	RAL GAS							
Name of Authorized Transporter of Oil	# 6]	or Condensa	le 🔀				roved copy of this			()	
Navajo Refining Company Name of Authorized Transporter of Casinghead Gas or Dry Gas					P. O. Drawer 159, Artesia, NM 88210 Address (Give address to which approved copy of this form is to be sent)						
Sid Richardson Carbon & Donate											
If well produces oil or liquids, Unit Sec. Twp. Rge. Is gas actually connected? I 26 20 S 36E Yes						į v	Vhen ? 12/1/90	1			
If this production is commingled with that				<u> </u>	ber:		1.2/1/70	.,			
IV. COMPLETION DATA											
Designate Type of Completion	- (X)	Oil Well 	Gas Well	New Well	Workover	Deep	en Plug Back	Same Ro	:s'v	Diff Res'v	
Date Spudded	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.	P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing De	Tubing Depth			
Perforations						Depth Casi	Depth Casing Shoe				
	CEMENTI										
HOLE SIZE	HOLE SIZE CASING & TUBING SIZE			DEPTH SET				SACKS CEMENT			
	-										
V. TEST DATA AND REQUES	T FOR AL	LOWAR	RLE								
OIL WELL (Test must be after r				be equal to or	exceed top all	lowable fo	r this depth or be	for full 24	hours.	.)	
Date First New Oil Run To Tank	Date of Test			Producing M	thod (Flow, p	ump, gas	lift, etc.)				
Length of Test	Tubing Pressure			Casing Pressa	ıre	Choke Size	Choke Size				
AI.B. I.B T.							Gas- MCF	C. MCF			
Actual Prod. During Test	Oil - Bbls.			Water - Bbls.			Gas- IVICI	Cas- Wei			
GAS WELL											
Actual Prod. Test - MCF/D	Length of Test			Bbls. Condensate/MMCF			Gravity of	Gravity of Condensate			
Festing Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size	Choke Size			
VI. OPERATOR CERTIFIC	ATE OF	COMPI	IANCE							!	
				(DIL CON	NSEF	RVATION	DIVIS	1016	1	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					JUN 0 2'92						
is true and complete to the best of my i	mowledge and	belief.		Date	Approve	ed	J (J) Y	V 4 5	14		
Jarris	neo 1	لهم					A 2 [Park Park max	and the second			
Signature				By_ੰ	HKHAINA	<u>it SIG</u>	NED BY R	AY Sh	ß [r	- say	
Farris Nelson Engineer Printed Name Title				!							
6/1/92	50	5-393-2	937	litte							
Date	· · · · · ·	Teleph		ll							

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.