Submit 5 Copies
Appropriate District Office
DISTRICT 1
P.O. Box 1980, Hobbe, NM \$8240

State of New Mexico Energy, Minerals and Natural Resources Departmen

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., Aziae, NM 17410

P.O. Drawer DD, Artesta, NM \$2210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.	T	OTRAN	ISPC	RT OIL	AND NAT	URAL GA	S	W. C.		 7	
Operator							Wall API No.				
Read & Stevens, Inc.						30-02531189					
P. O. Box 1518, Roswe	11, New	Mexico	882	202-151	8	(Bllo					
Reason(s) for Filing (Check proper bax)		~ 1 ₋ ~	·	1 06	L) Other	r (Please expla	ur)			Ì	
Change in Transporter of: Completion Oil Dry Cas											
Recompletion Cil Estrophesia Cis Condensate Cis Cis Condensate Cis											
If change of country give same R - 10072											
and address of previous operator											
II. DESCRIPTION OF WELL AND LEASE Well No Pool Name, Includin									(Lesse Lesse Na.		
Lease Name					rederal oration NM-54432						
Mark Federal 2 Quail Ridge Delaware NN-54452											
Unit Letter N : 460 Feet From The South Line and 1650 Feet From The West Line											
Section 3 Township 20S, Range 34E, NMPM, Lea County											
III. DESIGNATION OF TRAN	SPORTE	R OF OII	LANI	NATU	RAL GAS		• •				
Name of Authorized Transporter of Oil	Address (Give address to which approved copy of this form is to be sent										
Texas New Mexico Pipe	P. O. Box 2528, Hobbs, New Mexico 88241 Address (Give address to which approved copy of this form is to be sent)										
arms of Authorized Transporter of Casinghead Clas or Dry Clas											
If well produces oil or liquids, give location of tanks.	UNIL		Iwp. 20S	1 34E	Is gas actually	consected?	When	1.			
If this production is commingled with that i	{ -:			e commingi	ing order numb	er:					
IV. COMPLETION DATA	<u> </u>							<u> </u>	Yan an Banka	Diff Res'v	
Designate Type of Completion	- (X)	Oil Well		les Well	New Well	Workover	Deepen	İ	Same Res'v	Dill Kerv	
Date Speeded	Date Compl. Ready to Prod.				Total Depth			P.B.T.D.			
Elevations (DF, RXB, RT, GR, stc.)	Name of Producing Formation				Top Oil/Gas I	Top Oil/Gas Pay			Tubing Depth		
Perforations					Depth Casing Shoe						
			=:==	.a	CTL (CAPTE	IC DECOR		1			
	TUBING, CASING AND				CEMENTI	DEPTH SET	<u> </u>	1 8	SACKS CEMENT		
HOLE SIZE	HOLE SIZE CASING & TUBING SIZE					DC: 11. GG.					
	T POR I	110011	च । त		<u> </u>			L			
V. TEST DATA AND REQUES OIL WELL (Tell must be after r	IT FOR A	LLUWA Ial wiwa a	DLE Lload o	sil and must	be equal to or	exceed top allo	wable for thi	s depth or be j	for full 24 hou	ors.)	
Date First New Oil Run To Tank	Date of Ter		, 10 0		Producing Me	thod (Flow, pu	mp, gas lift, e	ite.)			
								Tooke Size	Choke Size		
Length of Test	of Test Tubing Pressure				Casing Pressure			Choks Size	;		
Actual Prod. During Test	Oil - Bbls.			Water - Bbla			Our MCF	Gu- MCF			
GAS WELL					·						
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF			Gravity of Condensals			
Totting Method (pilot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size	Choke Size		
i eding Method (puot, back pr.)											
VI. OPERATOR CERTIFICATE OF COMPLIANCE					OIL CONSERVATION DIVISION						
thereby certify that the rules and regulations of the Oil Conservation					1						
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					Date Approved NOV 0 1 1993						
Of MACO					Date	y Whhiove	· · · · · · · · · · · · · · · · · · ·				
John Childry J.					By ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR						
John C. Maxey, Jr. Petroleum Engineer Printed Name Title					Tule			RICI I SUP	EKAIDÜK		
10/28/93	505/e	522-377	0		III IIII	Vary	-				
Date		Telef	shone N	w),	H .						

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.