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

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

OIL CONSERVATION DIVISION P.O. Box 2088

DISTRICT III

Santa Fe, New Mexico 87504-2088

00 Rio Brazos Rd., Aziec, NM 87410	REQL	JEST FO	OR A	ALLOWAI	BLE AND NA	AUTHORI: TURAL GA	ZATION AS					
perator		TO TRANSPORT OIL				Well Well			API No.			
layton Williams Energy, L	۔ سیکسا،	TNC					30	-025-0883	8			
dress	<u>نے ا</u>											
Six Desta Drive, Suite 300	0	Midlan	d, I	exas 7970								
ason(s) for Filing (Check proper box)					_	et (Please expl	1					
w Well		Change in	Tran	sporter of:	Change	in Operato	r Name on	у.				
scompletios	Oil	ᆜ	Dry	Gas 📙	Effecti	ve $04/07/3$	13.					
nange in Operator	Casingher	d Gas	Con	denmie		<u>,/</u>						
hange of operator give name	lavton W	. Willia	ms.	Jr., Inc.								
States of bissions obsisions				10	, -							
DESCRIPTION OF WELL	AND LE	ASE 🕌		> r	ut-	(Dan Can)	Kind o	Lease	Le	ase No.		
case Name	Well No. Pool Name, Including				State, *			*AAAA AAAAA				
State A AC 2	<u> </u>	49	Ja	Imat lans	111 faces	7 1013						
ocation					tu e	c	60 Fe	75.	North	Line		
Unit LetterC	_ :1	980	_ Fed	t From The _	west Li	e and	<u> </u>	et From The .	1101 011			
0		c	n		36E , N	мрм,	Le	a		County		
Section 8 Townshi	i p 22	3	Ran	ige	30E , I	INITIVI,						
I. DESIGNATION OF TRAN	TT G (AG2)	D OF O	TT. A	ND NATI	IRAL GAS							
I. DESIGNATION OF TRAIN ame of Authorized Transporter of Oil	- CKII	or Coade		[XX]	Address (G	ve address to w	hich approved	copy of this f	orm is to be se	nt)		
Shell Pipeline Company					Box 4	2130 F	Houston, Texas 77242					
iams of Authorized Transporter of Casin	ghead Gas		or I	Ory Gas XX	Address (G	ve address to w	hick approved	copy of this form is to be sent)				
XCEL Pipeline Company	YCEI Piceline Company					Six Desta Dr., Ste 5800 Midland, Tx 79705						
well produces oil or liquids,	Unit	Sec.	Tw	p. Rge	ls gas actua	liy connected?	When	?				
ve location of tanks.	<u>i</u>		1									
this production is commingled with that	from any of	her lease or	pool,	, give commit	gling order nur	nber:						
. COMPLETION DATA								· 	la serio	Diff Resiv		
		Oil Wel	u	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Dill Kesv		
Designate Type of Completion				<u> </u>	Total Doorb	<u> </u>		P.B.T.D.				
ate Spudded	Spudded Date Compl. Ready to Prod.				Total Depth	local Depth			P.B. 1.D.			
				 	Ton Oil/Ga	Top Oil/Gas Pay			Tubing Depth			
levations (DF, RKB, RT, GR, etc.)	Name of	Name of Producing Formation										
<u> </u>								Depth Casi	ng Shoe			
erforations				•	•	•	4		-			
		TIBBIC		SING AND	CEMENT	TNG RECO	RD	<u> </u>				
		TUBING, CASING AND CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
HOLE SIZE	 	ASING	COII	10 5125								
					1							
								1				
. TEST DATA AND REQUE	ST FOR	ALLOW	AB	LE								
IL WELL (Test must be after	recovery of	total volum	e of le	oad oil and mi	ust be equal to	or exceed top a	Howable for th	is depth or be	for full 24 hos	ers.)		
Date First New Oil Run To Tank	Date of 1				Producing	Method (Flow,	pump, gas lift,	eic.)				
								To 1. 6				
length of Test	Tubing F	Tubing Pressure				Casing Pressure			Choke Size			
<u> </u>								Gas- MCF				
Actual Prod. During Test	Oil - Bbl	s.			Water - Bb	is.		Uas- MCF				
								<u> </u>				
GAS WELL												
Actual Prod. Test - MCF/D	Length o	Length of Test				Bbls. Condensate/MMCF			Gravity of Condensate			
									Chaha Siya			
esting Method (pitot, back pr.)	Tubing	Tubing Pressure (Shut-m)				Casing Pressure (Shut-in)			Choke Size			
							 					
VL OPERATOR CERTIFI	CATE)F COM	[PI	IANCE		011 00	NOTO	/ATION	וטואופוי	∩N!		
I hereby certify that the rules and reg	nulations of E	he Oil Cons	EVAL	ion	- II	OIL CC	NSERV	AHON	ופועוט			
Devision have been complied with an	ad that the is	formation g	pven :	above	H			0 17 400	12			
is true and complete to the best of m	y knowledge	and belief.			Da	te Approv	red <u>JUL</u>	21 195	<u> </u>			
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Rolen A. 7	n.Co	cler	/	<u></u>	. II		Omin az					
Signature	7	1			By		Orig Sig Paul F	ened by				
Robin S. McCarley	P	roductio			-		Geolo	รสน ยะ ช า ์ล t				
Printed Name		(915) 6	-	ille 63.24	Tit	le		<u> </u>				
04/12/93				0324 086 No.	-							
Data		•			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 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.