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Appropriate District Office
DISTRICT!
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, Anesia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 REQUEST FOR ALLOWABLE AND AUTHORIZATION I. TO TRANSPORT OIL AND NATURAL GAS

Operator							Well	API No.	<del></del>		
Rice Engineering Co	rp.										
Address 122 W Taylor, Hobbs	NIM D	9240			***		<del></del>				
Reason(s) for Filing (Check proper box)		8240			<del></del>	···					
New Well	Other (Please explain)										
Recompletion	Transportation of Cobbls of Miscellaneous Hydrocarbons to Jadco on 12/14/92.										
Change in Operator	Oil Casingh	nead Gas	Dry G		нуагос	arbons t	o Jadec	on/2//	4′92.		
If change of operator give name and address of previous operator							·				
II. DESCRIPTION OF WELL	AND LI										
Lease Name	$\mathcal{H}$	Well No.	Pool N	lame, Includ	ling Formation	RI		of Lease		Lease No.	
Location	Shr	120	1_/_	Duni	it Sen	Media	State	, Federal or Fe	;e		
Unit Letter	_:_2	475	_ Feel F	rom The _	<u> </u>	e and	k 5_ F	eet From The	£_	Line	
Section 20 Townsh	1ip	30	Range		37 N	мрм,		Lea		County	
III. DESIGNATION OF TRAIN Name of Authorized Transporter of Oil	NSPORT	ER OF O	IL AN	D NATL	RAL GAS						
Bandera Petroleum, I		or Conder	1 Sale		Address (Giv	e address to w	hich approved	copy of this	form is to be s	ens) -	
Name of Authorized Transporter of Casin	nghead Gas		or Dry	Gas [	Address (Giv	Box 430	, Hobbs	NM 88	1240 Form is to be se		
					7,000,000	* GLLD 233 10 W	nuch approved	copy of thus )	orm is to be se	eni)	
If well produces oil or liquids, give location of tanks.					is gas actually		When	?			
If this production is commingled with that IV. COMPLETION DATA	from any or	ther lease or	pool, giv	ve comming	ling order numb	xer:	· · · · · · · · · · · · · · · · · · ·				
Designate Type of Completion	- (X)	Oil Well	(	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Compl. Ready to Prod.				Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	(B, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth		
Perforations								Depth Casing Shoe			
								Depth Casin	g Snoe		
		TUBING,	CASI	NG AND	CEMENTIN	G RECOR	D	J			
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
				<del></del>				ļ	<del></del>		
	+										
V. TEST DATA AND REQUES	T FOR	ALLOWA	BLE		l		<del></del>	1		<del></del>	
OIL WELL (Test must be after r				il and must	be equal to or a	exceed top allo	wable for this	depth or be f	or full 24 how	rs.)	
Date First New Oil Run To Tank	Date of Te				Producing Met	hod (Flow, pu	mp, gas lift, e	(c.)			
Length of Test	Tubing Pressure				Casing Pressur	<del></del>		Choke Size			
Actual Prod. During Test	· · · · · · · · · · · · · · · · · · ·										
Countries. During Test	Oil - Bbls.			Water - Bbls.			Gas- MCF				
GAS WELL								·			
Actual Prod. Test - MCF/D	Length of	Test			Bbls. Condense	te/MMCF		Gravity of Co	ondensate		
esting Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
II OPED ATOR COR				-					•	•	
I. OPERATOR CERTIFIC.				CE		II CON	CEDV/	TIONE	MICIO	. N.I	
I hereby certify that the rules and regulations of the Oil Conservation  Division have been complied with and that the information given above					OIL CONSERVATION DIVISION						
is true and complete to the best of my k	nowledge ar	nd belief.	20046		D	A		DEC 1	92		
Rilly minite					Date	Approved					
Inly wager					Signed by						
Signalure Signalure Foreman Signalure Foreman					By Paul Kents Geologis						
Printed Name			9174		Title_	F.C.	ATAN ME				
Date Date					1,416		·		<del></del>	<del></del>	
		i eleph	none No	. [	I						

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.