Submit 5 Copies
Appropriate District Office
DISTRICT I
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, Artenia, NM 88210

OIL CONSERVATION DIVISION

P.O. Box 2088

DISTRICT III	Santa Fe, New Mexico 87504-2088										
1000 Rio Brazos Rd., Aztec, NM 87410	REQ	UEST F	OR A	LOWA	RI E AND	ALITHORI	ZATION		,		
REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS											
								API No.			
Address COMPANY							30-025-24947				
P. O. BOX 10340, Mid	land,	Texas	79701	-7340							
Reason(s) for Filing (Check proper box) New Well					Oil	her (Please explo	sin)	· · · · · · · · · · · · · · · · · · ·			
Recompletion	Oil	Change i	in Transpo Dry Ga								
Change in Operator		ad Gas 🏻									
If change of operator give name and address of previous operator											
II. DESCRIPTION OF WELL AND LEASE											
Covington "A" Federa				of Lease No. Federal or Fee NM-2379							
Location											
Unit Letter : 660 Feet From The North Line and 1980 Feet From The West Line											
Section 25 Township 22 South Range 32 East , NMPM, Lea County											
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS											
						Address (Give address to which approved copy of this form is to be sent)					
EDT Energy Con	Energy Corp										
Transwestern Pipeline	Iame of Authorized Transporter of Casinghead Gas X or Dry Gas Transwestern Pipeline Co.					Address (Give address to which approved copy of this form is to be sent) P. O. Box 1188, Houston, Texas 79752					
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge.		ly connected?	When				
give location of tanks.	1	1	<u> </u>	<u>i </u>			i				
If this production is commingled with that from any other lease or pool, give commingling order number: IV. COMPLETION DATA											
Decision To a CC 11		Oil Wel	11 0	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion Date Spudded		_l			Total Depth	<u>i</u>	i	<u> </u>			
Date Spudded Date Compl. Ready to Prod.								P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth			
Perforations								•			
Depth Casing Shoe											
TUBING, CASING AND CEMENTING RECORD											
HOLE SIZE		ASING & T			DEPTH SET			SACKS CEMENT			
			 -	~							
					<u> </u>						
V. TEST DATA AND REQUES											
OIL WELL (Test must be after re				oil and mus	t he equal to or	r exceed ton allo	wahle for thi	s denth or he f	or full 24 hour	1	
Date First New Oil Run To Tank	Date of T					ethod (Flow, pu			01 3411 24 1104	3./	
Length of Test					<u> </u>	·		IGL-L-S-			
renkai oi tex	th of Test Tubing Pressure				Casing Pressure			Choke Size			
Actual Prod. During Test	Oil - Bbls.				Water - Bbis	Water - Bbis.			Gas- MCF		
	<u></u>				1	·	<u></u>	1			
GAS WELL Actual Prod. Test - MCF/D											
Actual Prod. Test - MCF/D Length of Test					Bbis. Condensate/MMCF			Gravity of C	Gravity of Condensate		
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Press	Casing Pressure (Shut-in)					
					\ <u></u>			<u> </u>			
VI. OPERATOR CERTIFICATE OF COMPLIANCE					11 (OIL CON	ISERV	ΔΤΙΩΝΙ	טועופור	NI.	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above							IOLI I V	AHON		/IN	
is true and complete to the best of my knowledge and belief.						Approve	d JUL	2 9 199	3		
Kiland L. milt											
Signature Signature					By_	By Orig. Signed by Paul Kautz Geologist					
Signature Richard L. Wright Div. Oper. Mgr.						Paul Kautz Coologist					
July 26, 1993 915/682-6822						!					
Date		Tel	ephone N	lo.	Ш						

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.