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

## OIL CONSERVATION DIVISION

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

I.

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 P.O. Box 2088 Santa Fe, New Mexico 87504-2088

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator									Well	API No.			
Dwight A. Tipton										30-025-2	27149		
Address													
c/o Oil Reports		vices,	, In	ıc.	, P. O					241			
Reason(s) for Filing (Check proper bo	<b>x</b> )					Oth	er (Please e	xpla	iin)				
New Well	_	Change i	-	•									
Recompletion :	Oil			/ Gas			Effec	ti	ve 7/1/	90			
Change in Operator X	Casinghe	ad Gas	Con	nden	sale					<del></del>			
f change of operator give name and address of previous operator	Adobe Re	source	es C	or	p., 30	O W. Tex	as, Su	ite	e 1:00.	Midland	1. TX 79	701	
•									•		•	54603	
II. DESCRIPTION OF WEI Lease Name								Vind	of I assa	<del>, </del>	NM-0554603 Lease No.		
Elliott "A" Feder	ra 1	1			=			I .	Kind of Lease Some Federal or Feex				
Location	. c. 1	1 Wantz Al				30				Above			
<b></b>	_	0.1.0					_						
Unit LetterE	:	2310	_ Fee	t Fro	om The N	orth Lin	e and $\frac{3}{2}$	<u>30</u>	F	eet From The	West	Line	
Service O Terro		a			205		· rm r		_			Country	
Section 9 Town	uship 21	.S	Ran	ige_	38E	, N	мрм,		Lea			County	
II. DESIGNATION OF TR	ANGPODTE	ED OF C	) I I A	NT	NATH	DAL CAS							
Name of Authorized Transporter of Or		or Conde		2111	- NAIU		e address to	wh	ich approved	copy of this f	form is to be s	ieni)	
JM Petroleum						Address (Give address to which approved copy of this form is to be sent)  2000 N. Tower, Dallas, TX 75240							
Name of Authorized Transporter of Ca	singhead Gas	xx	or I	Ory (	Gas 🗀	· · · · · · · · · · · · · · · · · · ·				copy of this f			
Texaco Producing	-	نمم		, `	نــــا -	1			• •	a. OK 74		•	
If well produces oil or liquids,	Unit	Sec.	Twr	p.	Rge.	Is gas actuall			When		111/		
ive location of tanks.	Н	8	21		38E		Yes		i	4/30/82	)		
this production is commingled with t		<del></del>								<del>-+/.31//3</del> /	<del>- , , </del>		
V. COMPLETION DATA			,	-						<del></del>			
		Oil Wel	1	G	as Well	New Well	Workover	-	Despen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completi	on - (X)	İ	i			Ì	İ	Ì	·	İ	ĺ	Ì	
Date Spudded	Date Com	pl. Ready t	o Prod	1.		Total Depth	•			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Producing Formation				Top Oil/Gas Pay				Tubing Depth				
erforations										Depth Casin	g Shoe		
	7	TUBING,	CA:	SIN	G AND	CEMENTI			<u> </u>				
HOLE SIZE	CA	CASING & TUBING SIZE					DEPTH SET				SACKS CEMENT		
										<del> </del>			
							<del></del>						
CONTRACTOR	ECT FOR	I I OW	ADI	T.						<u> </u>			
TEST DATA AND REQU						L	awasad tan	-11 a.	uahla for thi	e denth or he i	for full 24 hou	vre )	
OLL WELL (Test must be after Date First New Oil Run To Tank	Date of Te		oj 100	14 01	l ana musi	Producing Me					or juli 24 hou	<i>V</i> 3.)	
Date Pirst New Oil Ruii 10 12mk	Date of 1e	S.				Flooring Me	MINU (2.1014)	pw.	rip, gas igi, e	•6./			
and of Total					Casing Press				Choke Size				
ength of Test	essure				Casing Pressure								
D. C. T.	Oil - Bbls.						TV Dili-				Gas- MCF		
Actual Prod. During Test	ibls.				Water - Bbls.								
										<u></u>			
GAS WELL													
Actual Prod. Test - MCF/D	Length of	Test	·			Bbls. Conden	sate/MMCF			Gravity of C	ondensate		
esting Method (pilot, back pr.)	essure (Shut-in)				Casing Pressure (Shut-in)				Choke Size	Choke Size			
	<u> </u>												
I. OPERATOR CERTIF	CATE OF	COMF	PLIA	N	CE				<u> </u>		D1. ((C) (	<b>5</b> N. I	
I bereby certify that the rules and re							JIL CC	N.	<b>SEHV</b>	NOITA	אוטועור	JIN .	
Division have been complied with a	nd that the infor	mation giv											
is true and complete to the best of n	iy knowledge ar	nd belief.				Date	Approv	/ec	1				
41 11 .													
Wannin John	<u></u>					D			. •				
Signature						RA							
Donna Holler		Ag	ent										
Printed Name			Title			Title							
8/14/90		505-	393										

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.