DISTRICTJ P.O. Box 1980, 110664, NM 88240	and the second and	JIL CONSERVATION DIVISION		Revlocd 1-1-89	
DISTRICTI	JIL CONSER			See Instructions at Bottom of Page	
P.Ö. Drawer DD, Artesia, NM 88210 DISJ BICT III		D. Box 2088 v Mexico 87504-2088			
1000 Rio Biazos Rd., Aziec, NM 874	110				
1.	TO TRANSPORT	VABLE AND AUTHORIZA	ATION		
Openator Hal J. Rasmussen, O		OIL AND NATONAL GAS	Well API No.		
Address					
6 Desta Drive, Suite Reason(s) for Filing (Check proper bo	e 2700, Midland, TX 7970)5			
New Well	x) Change in Transporter of:	Other (Please explain,)		
Recompletion	Oil Diy Gag				
Change in Operator X If change of operator give name	Casinghéad Gas Coudensate			·····	
and address of previous operator	larks & Garner Productic	on Company, P O Box 7	70, Lovington,	NM 88260	
11. DESCRIPTION OF WEL	LAND LEASE Well No. Pool Natia, Ind	Indina Pouvation	Kind of Leare		
Kaiser State	10 Wilson Y	ates-Seven Rivers	State, Render WXTHE	6807	
Unit Letter	660 Best From 73 .	South Line and 1980.		Jost	
10			Feet From The	Une Une	
	1140/84	.NMPM. Lea		County	
III. DESIGNATION OF TRA Name of Authorized Transporter of Oil		TURAL GAS			
Navajo Refining Com		Address (Give address to which P O Drawer 159, A	<i>approved copy of this form</i> Artesia, NM 882	n is io be seni) 210	
	Phillips 66 Natural Gas Address (Glive address to which approved copy of this form is to be sen Bartlesville, OK 74003				
If well produces oil or liquida, give location of tanks.	Unit Seo. Twp. R	ge. Is gas actually connected?	When 7		
If this production is commingled with the	L 13 215 34 at from any other lease or pool, give commi		6-10-82		
IV. COMPLETION DATA			·····		
Designate Type of Completion	n - (X)	New Well Workover	Deepen Plug Back Sa	me Res'v Diff Res'v	
Date Spaidded	Date Compl. Ready to Frud.	Total Depth	P.D.T.D.		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation		Top Olucian Pay	Tubing Depth	Tables Death	
			Depth Casing 5	ice	
HOLE SIZE	TUBING, CASING ANI	CEMENTING RECORD			
	CASING & TUBING SIZE	DEPTH SET	SAC	SACKS CEMENT	
		······································			
	-	-	· · · · · · · · · · · · · · · · · · ·		
V. TEST DATA AND REQUE	ST FOR ALLOWABLE]	
DIL WELL (Test must be after) Date First New Oil Run To Tank	recovery of total volume of load oil and mus	t be equal to or exceed top allowable Producing Method (Flow, pump, go	for this depth or be for fu	ll 24 hows.)	
		r noucing method (r tow, pump, go	at iyi, eic.)		
ength of Test	Tubing Pressure	Casing Pressure	Choke Size	Choke Size	
Actual Prod. During Test	Oil - Bbls,	Water - Bbis.	Gas- MCP		
GAS WELL Actual Frod. Text - MCP/D	Length of Test				
		Bbls. Condensate/MMCF	Gravity of Condei	Gravity of Condensate	
esting Method (pilot, back pr.)	Tubing Freesure (Shut-in)	Casing Freesure (Shut-in)	Clioke Size		
I. OPERATOR CERTIFIC	ATE OF COMPLIANCE		l		
I hereby certify that the rules and regula	tions of the Oil Conservation	OIL CONSEI	RVATION DIV	ISION	
Division have been complied with and this tue and complete to the best of my ki	nat the information given above nowledge and belief.				
I.I. C.I.D	,	Date Approved			
Signature	suy	By			
Scott Ramsey	Vice President				
08-01-91					
Date	915-687-1664 Telephone No.	Title			

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.

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- 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.