Submit S Copies Appropriate Districe Office DISTRICT I P.O. Box 1980, Hobbe, NM 84240 DISTRICT II P.O. Drawer DD, Artesia, NM 84210 DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 I.	State of New Mexico Energy, Minerals and Natural Resources Department OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088 REQUEST FOR ALLOWABLE AND AUTHORIZATIC TO TRANSPORT OIL AND NATURAL GAS							Form C-104 Revised 1-1-39 See Instructions at Bottom of Page	
Denior P&P PRODUCING,						Well	<b>API Na</b> 3C-025-	06665	
Address P. O. BOX 3178,	MIDLA	AND, TE	XAS 797(	02-3178	3				
Reason(s) for Filing (Check proper bax) New Well Recompletion Change in Operator X If change of operator give name		d G14 🗌 C4	y Gas		het (Please expl	-   .	. •		
and address of previous operator			FY, LTD	• ,		4495	, HOUST	ON, TEXAS 77210	
IL DESCRIPTION OF WELL	В	Well Na Po 1	ol Name, Includ FENROSI at From The	ESKELI	LY GRAYE	BURGSue	of Lease , Federal of Fee	E Line	
19 Section Township	2	21S	371	E	LE MPM		cer From the "	County	
••••••••••••••••••••••••••••••••••••••						-		County	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS         Name of Authorized Transporter of Oil       X or Condensate         Mame of Authorized Transporter of Oil       X or Condensate         TEXAS NEW MEXICO PIPE LINE       BOX 60028, SAN ANGELO, TX 7         Name of Authorized Transporter of Catinghead Gas       X or Dry Cas								TX 76906	
TEXACO EXPLORA	FION & PRODUCING INC BOX 3000, TULSA, OK 74102							×m u lo be seni) 102	
If well produces oil or liquide, give location of tanks.	Unuit H		<b>p.   Rge.</b> 21   37	le gas actual	y connected? YES	Whee		21/54	
If this production is commingled with that f IV. COMPLETION DATA	rom any oth	er lease or pool	, give comming	ling order num	iber:	HC.	305	······································	
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.E.	L I	
Elevations (DF, RKB, RT, CR, etc.)	Name of Pi	roducing Forma	llion	Top Oil/Ges Pay			Tubing Dept	Tubing Depth	
Perforstions	<u>_</u>			······			Depth Casing Shoe		
HOLE SIZE		UBING, CA		CEMENTING RECORD DEPTH SET			SACKS CEMENT		
V. TEST DATA AND REQUES OIL WELL (Test must be after re Date First New Oil Rub To Taak		eal volume of l		· · · · · · · · · · · · · · · · · · ·				or full 24 hours.)	
				Producing Method (Flow, pump, gas lift, en Casing Pressure			Choke Size		
Length of Test	Tubing Pressure								
Actual Prod. During Test	Oil • Bbis.			Water - Bbla			Gas- MCF		
GAS WELL Actual Prod. Test - MCF/D	Length of	Test		Bbls. Condensate/MMCF			Gravity of C	Gravity of Condensate	
Testing Method (pilor, back pr.)	Tubing Pre	ane (Shut-m)		Caring Presente (Shut-In)			Choke Size	Choke Size	
VL OPERATOR CERTIFICATE OF COMPLIANCE I bereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				OIL CONSERVATION DIVISION     OIL CONSERVATION DIVISION     OU   00     Out   00					
Signatuarry R. BOREN MGR., OPER. ACCTG. Printed Name <u>1923</u> 1993 (915)683-4768 Date Telephone No.				OISTRICT I SUPERVISOR					

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.

All sections of this form must be filled out for allowable on new and recompleted wells.
 Fill out only Sections 1. II. III. and VI for changes of operator, well name or number, transporter, or other such changes.