Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240 .iergy, Mine

State of New Mexico

Form C-104

OIL CON DISTRICT II
P.O. Drawer DD, Astesia, NM 88210

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410

1315 and Namiai Kesources Departing	Keaming T-T-93
·	See Instruction
NSERVATION DIVISION	at Bottom of Pr
DO D== 2000	

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[.		TO THA	NSP	OH I OIL	AND NA	TURAL GA		DI No			
Operator Programme Transport	T	Well						į.			
Texaco Producing	inc.						1 30-	<u>025–308</u>	15		
Address	1 1716	00010									
P.O. Box 730, Hob	bs, NM	88240	<u> </u>								
Reason(s) for Filing (Check proper box)			_	_		et (Please expl	lut)				
New Well		Change in	-								
Recompletion	Oil		Dry G								
Change in Operator	Caninghe	ad Gas 🔝	Conde	ente							
If change of operator give name and address of previous operator											
and armed of previous operator											
IL DESCRIPTION OF WELL	AND LE									<u> </u>	
Lease Name		Well No. Pool Name, Including Formation					-	x Lease Fodomicon Fo	, –	Lease No.	
O. L. Coleman		6	6 Eumont Yates 7 Rvrs Qn Gas					Federal or Fe			
Location											
Unit Letter B	:	990	Feet I	From The	North Lin	e and19	80Fe	et From The	East	Line	
Section 17 Townsh	_{tip} 21	l S	Range	3	36E <u>, n</u>	МРМ,	Lea			County	
III. DESIGNATION OF TRAI	NSPORTE	ER OF O	IL Al	VD NATU							
Name of Authorized Transporter of Oil		or Conden	isate		Address (Gi	ve address to wi	hich approved	copy of this f	orm is so be s	ent)	
Name of Authorized Transporter of Casi	nghead Gas		or Dr	y Gas 🔣	Address (Gi	ve address to wi	hich approved	copy of this f	orm is to be s	ent)	
Texaco Producing	Inc.				P.O. H	Box 1137,	Eunice	<u>, NM</u> 8	8231		
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge.	ls gas actual	ly connected?	When	?			
give location of tanks.		1				Yes	L	06-27	- 90		
If this production is commingled with the	t from any ot	her lease or	pool, g	ive commingl	ing order num	iber:					
IV. COMPLETION DATA										-	
		Oil Well		Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	1 - (X)	i	i	X	Х	i	i	i	İ	i	
Date Spudded	Date Corr	pi. Ready to	Prod.		Total Depth		<u> </u>	P.B.T.D.	<u> </u>	<u> </u>	
05-05-90		05-2		0		3750 '			3745 '		
Elevations (DF, RKB, RT, GR, etc.)	Name of I	Producing Fo			Top Oil/Gas			Tubing Dep			
3622' GR		Quee						3469'			
Perforations					Depth Casing Shoe						
3588-3612', 3628-	501. 37	712-16	. 31	0-361				-	3750'		
3300 3012 , 3020		TUBING, CASING AND CEMENTING RECORD					מי	<u>'</u>	<u> </u>	-	
HOLE SIZE		CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT			
12-1/2"		8-5/8"			 	1260'			800		
7-7/8"	-		$\frac{3/8}{1/2}$		3750'			750			
7-778		_ر	1/2			3730		730			
					<u> </u>			`			
V. TEST DATA AND REQUE	CT FOD	ATTOW	A DI 1	<u> </u>	i		 	· · · · · · · · · · · · · · · · · · ·			
OIL WELL (Test must be after					h		numble for thi	e denth or he	for full 24 hos	ere)	
Date First New Oil Run To Tank			oj toda	a ou ana musi		fethod (Flow, p			jor jiai 24 1101		
Date First New Oil Rull 10 1ank	Date of T	es			Liouncing w	reusou (Frow, p	muh' kan sasi s	.,			
Length of Test	Tuki P				Casing Press	Bire		Choke Size			
Length of Test	Tubing Pr	CABLIFE			Casing Fies						
Actual Prod. During Test	Oil - Bbis				Water - Bbl		Gas- MCF				
Actual Frod. During Test	Oil - Bois	i.			Water - Dork						
L					L			 			
GAS WELL											
Actual Prod. Test - MCF/D	Length of	Length of Test			Bbls. Condensate/MMCF			Gravity of Condensate			
848 (ADF)		24			0						
Testing Method (pitot, back pr.)	Tubing P	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size			
Back Press		278			Pkr						
VI. OPERATOR CERTIFIC	CATEO		DT TA	NCE							
					11	OIL CO	NSERV	ATION	DIVISIO	NC	
I hereby certify that the rules and reg Division have been complied with an										_	
is true and complete to the best of m							اند		199	11/	
					Dat	e Approve	ea		· · ·		
XNPI											
J. J. J. All	non				∥ By_	,			Y JERRY SI Pulitikar	EXTON	
Signature L. D. Ridenour	Engine	er's A	ssi	stant	-,-				74 <u>.11.13</u>		
Printed Name			Title		Tal	•					
07-16-90	(505)	5) 393-			Title	<i>=</i>					
Date			ephone								
	_		-		.11						

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.