Submit 5 Copies Appropriate District Office DISTRICT I P.O. Box 1980, Hobbs, NM 88240	Energ			ew Mexico ural Resour	fexico Resources Department			Form C-104 Revised 1-1-89 See Instructions at Bottom of Page	
DISTRICT II P.O. Drawer DD, Anenia, NM \$8210	OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088							at Bournin of Lafe	
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410	REQUEST					RIZATIO	N		
Operator	TO 1	RANSPC		AND NA	TURAL				
Clayton Williams Energy, $+$:t:C. InC						We	30-025-09231		
Address								· · ·	
Six Desta Drive, Suite 30 Reason(s) for Filing (Check proper box)	00 Midland	1, Texas 7	9705	X Out	er (Please e	colain)			
New Well	Chan; Oil Casinghead Gas	ge in <i>cransport</i> Dry Gas			in Opera ve 04/07	tor name (/93	only.		
change of operator give sameC1	ayton W. Willi	ams, Jr.,	lnc.					······································	
I. DESCRIPTION OF WELL	AND LEASE								
Lasse Name State A AC 1	Well No. Pool Name, Inclus 63 Langlie Mat		•	•	Queen (ad of Leane te, Haddick Kar How	Lease No.	
Unit Letter!	. 1980		m The	South Lin	: and	660	Feet From The	East Lin	
Section 3 Townsh	ip 23S	Range	36	5E . N	MPM,		Lea	County	
II. DESIGNATION OF TRAI	or Co		NATU		e address in	which anon	and come of this form	n in the hermal	
Texas New Mexico Pipeline Company				Address (Give address to which approved copy of this form is to be sent) Box 42130 Houston, Texas 77242					
Name of Authorized Transporter of Casis Xcel Gas Company	ghead Gas XX or Dry Gas			Address (Give address to which approved cop 6 Desta Dr., Suite 5300 Mi				· ·	
f well produces oil or liquids, ve location of tanks.	Unit Sec.	Twp.	Rge.	Is gas actuali			Midland, To wmm ?		
this production is commingled with that	from any other leas		commungi	ing order sum					
V. COMPLETION DATA									
Designate Type of Completion	- (X) Oil 1	Well Ga	s Well	New Well	Workover	Deeper	Plug Back Sa	me Res'v Diff Res'v	
ale Spudded	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.	P.B.T.D.	
levanons (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth	Tubing Depth	
erforations			·.				Depth Casing S	hoe	
		IG, CASIN		CEMENTI					
HOLE SIZE	CASING	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT	
							•	· · · · · · · · · · · · · · · · · · ·	
						<u> </u>			
. TEST DATA AND REQUE									
IL WELL (Test must be after the First New Oil Rua To Tank	recovery of total volu Date of Test	eme oj loda ou				pump, gas lif		<u>puli 24 hours.)</u>	
eugh of Test	Tubing Pressure			Casing Pressure			Choke Size		
•									
uctual Prod. During Test	Oil - Bbis.			Water - Bbis.			Gas- MCF		
GAS WELL	<u>.i</u>								
ctual Prod. Test - MCF/D	Length of Test			Bbls. Condensais/MMCF			Gravity of Con	Gravity of Condensate	
sting Method (pice, back pr.)	Tubing Pressure (Shut-m)			Casing Pressure (Shiz-in)			Choke Size	Choke Size	
I. OPERATOR CERTIFIC I hereby certify that the rules and regu Division have been complied with and is true and complete to the best of my	lations of the Oil Co that the information	gives above	E		DIL CC	JU	ATION DI L 27 1993		
Robin S. W	ACCARDO.	\mathcal{D}			r r · • •		on at Dr		
Signature Robin S. McCarley	Producti	on Analyst		By_	·	Orig. Si Paul			
Printed Name		Title	<u> </u>	Title		Geol	ogist		
04/01/93	(915) 68	<u>2-6324</u> Telephone No.		1.09		·			

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 I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
Separate Form C-104 must be filed for each pool in multiply completed wells.

OCD HOBBS OFFICE

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