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

State of New Mexico Energ. . Ainerals and Natural Resources Department Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

	T	O TRA	NSP	ORT OIL	AND NAT	URAL GA	<u>\S</u>	DI M-			
erator								Well API No.			
Clayton W. Williams, J	30-025-09288										
tress Six Desta Drive, Suite	3000 M id.	land. T	exas 7	79705						<u> </u>	
ason(s) for Filing (Check proper box)	3000, 11.0				XXX Othe	r (Please expla	in)	-			
w Well		Change in	•		effective	July 1, 1	991				
completion	Oil	:	Dry Ga								
ange in Operator XXX	Casinghead		Conde						T 7/	205	
hange of operator give name address of previous operator	Hal J. Rası	mussen	Opera	ting Inc.	, Six Desi	a Drive, S	Suite 2700), Midland	, lexas /	9/05	
DESCRIPTION OF WELL	. AND LEA	SE	TA								
ase Name	110 0 223	Well No.	Pool N	lame, Includir	g Formation	(Pro (of Lease Fall-Market XPCN	-	ase No.	
State A A/C 1		9	Jalı	mat Tansi	11 Yt Seve	n Rivers	Suite,	THE PROPERTY OF THE PROPERTY O			
cation											
Unit LetterM	:	660	Feet F	rom TheS	outh Line	and660) Fe	et From The	West	Line	
		026	Dance	24	se , N	ІРМ ,	Le	a		County	
Section 9 Towns	hip	235	Range		<u> </u>	11 141,		·			
. DESIGNATION OF TRA	NSPORTE!	R OF O	IL AN	ID NATUI	RAL GAS						
me of Authorized Transporter of Oil		or Conde	nsate	XXX	Address (GIV	address to wi			orm is to be se	nt)	
Texas New Mexico Pipelin		Box 42130, Houston, Texas 77242 Address (Give address to which approved copy of this form is to be sent)									
ime of Authorized Transporter of Cas	inghead Gas		or Dry	Gas 💢		e <i>address to wl</i> ta <u>Drive,</u>					
Xcel Gas Company	177.5	· · ·	I Trum	Rge.	Is gas actuall		When		u, 10,403 /	3, 03	
well produces oil or liquids, e location of tanks.	Unit	Sec.	Twp.	 v&e	12 Rus arrisen	COMICAGO.	i				
his production is commingled with th	at from any oth	er lease or	pool, gi	ive commingle	ing order num	жг					
COMPLETION DATA	— —,								·——	_,	
		Oil Wel	1	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion		ــــــــــــــــــــــــــــــــــــــ			Total Death	<u> </u>		DRTD	<u> </u>		
nte Spudded	Date Comp	pi. Ready t	o Prod.		Total Depth			P.B.T.D.			
12 T DYD DE CD	comption		Top Oil/Gas Pay			Tubing Depth					
vations (DF, RKB, RT, GR, etc.) Name of Producing Formation											
rforations					L			Depth Casin	ng Shoe		
				•							
	TUBING, CASING AND				CEMENTI			CAOVO OFMENT			
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
											
							<u>.,</u>				
. TEST DATA AND REQU	FST FOR	ALLOW	ABL	<u> </u>							
IL WELL (Test must be afte	er recovery of to	otal volum	e of load	d oil and must	be equal to o	exceed top al	lowable for th	is depth or be	for full 24 ho	urs.)	
Date First New Oil Run To Tank	Date of Te				Producing M	ethod (Flow, p	ownp, gas lift,	etc.)			
					Casing Press			Choke Size			
ength of Test	of Test Tubing Pressure					ure					
OT PU					Water - Bbls.			Gas- MCF			
ctual Prod. During Test	rod. During Test Oil - Bbls.					-					
GAS WELL		Test			Bbls. Conde	neate/MMCF		Gravity of	Condensate		
ctual Prod. Test - MCF/D	Length of	Length of Test									
esting Method (pitot, back pr.)	Tubing Pr	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size		
mung meurou (puor, ouch pr.)	,										
L OPERATOR CERTIF	TCATE O	F COM	[PL 1A	NCE	7[011 00		/ATION	DIVICI	ON!	
L OPERATOR CERTIF	eculations of the	e Oil Cons	ervation			OIL CO	NSEH	AHON	וופועוט	ON	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					JUL 19 1991						
is true and complete to the best of	my knowledge	and belief.			Dat	e Approv	ed	OVE	IO	V 1	
Donother Co	vens				By.	<u> O</u> wice to	1.5-, 5-rg	<u> </u>	- 122 - 102 -		
Signature Dorothea Owens	Regui	latory	Anal v	st	-, -		1000	<u> </u>	in de de la completação de la completa La completação de la		
Printed Name	, , cyu		Title		Title	.					
June 7, 1991	(915) 682-6			''''						
Date		T	elephon	s No.	Ш						

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.
- 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.