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

State of New Mexico nergy, Minerals and Natural Resources Depar

Form C-104 Revised 1-1-89 See Instructions at Bottom of Page

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

P.O. Box 2088
Santa Fe New Mexico, 87504-209

OIL CONSERVATION DIVISION

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, New Mexico 87504-2088

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS	7	17-11
	•	TO TRANSPORT OIL AND NATURAL GAS
REQUEST FOR ALLOWABLE AND AUTHORIZATION		TO TRANSPORT OF AND MATURAL CAS
	100 100 21000 100, 111200, 1112 07 110	REQUEST FOR ALLOWABLE AND AUTHORIZATION

Operator							Well	API No.			
Jerry W. (Suy and	Thurma	n F.	Duncan				30-025-	-09321		
Address	-			•							
c/o Oil Reports &	Gas Ser	vices.	Inc	P. 0		5. Hobbs		241			
Reason(s) for Filing (Check proper box)		G	m		Ott	net (Please expl	aın)				
New Well	Oil	Change in		- —		Change o	f Opera	tor effe	ective 7,	/1/90	
Recompletion Change in Operator	Casinghe	ad Gas	Dry Conc	iensate		at 7:00	am MDT				
If change of operator give name	Casilgia	au Oas		eriaere							
and address of previous operator AF			s Co	mpany,	P. O. bo	x 1610,	Midland	. TX 797	702 Attr	n: A & D	
Lease Name	RIPTION OF WELL AND LEASE Well No. Pool Name, Inclu					ling Formation Kind			of Lease No.		
King WN		2			mattix		XF&deXiXX Fe				
Location		·	I	Dangite	maccin	710 920					
Unit LetterE	:19	80	. Feet	From The	North Lin	e and <u>660</u>	· F	eet From The	West	Line	
Section 12 Towns	nip 2	3 s	Rang	e 36	E, N	MPM, L	ea			County	
III. DESIGNATION OF TRA	NSPORTE			ND NATU							
Name of Authorized Transporter of Oil	X	or Conder	sate		1	e address to wi	*-			int)	
Texas New Mexico Pi	peline		5			ox 2528.				4\	
Name of Authorized Transporter of Casi Texaco Production I		x	or Di	y Gas	1	e address to wi				int)	
If well produces oil or liquids,	nc. Unit	Sec.	Twp.	Rge.		ox 3000.	Tulsa, When)2	· · · · · · · · · · · · · · · · · · ·	
give location of tanks.	7 E	12	23		Yes	•	i when	_	' -		
f this production is commingled with tha								2/21/			
V. COMPLETION DATA			,,								
Designate Type of Completion	- (X)	Oil Well	Ţ	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded		pl. Ready to	Prod	<u>`</u>	Total Depth	<u></u>	l	P.B.T.D.	<u> </u>		
	Jan 30,	p 1.0-0 y 10	1100					r.b.r.b.			
Elevations (DF, RKB, RT, GR, etc.)	Name of P	roducing Fo	rmatic	20	Top Oil/Gas Pay			Tubing Depth			
Perforations								Depth Casing Shoe			
	7	UBING,	CAS	ING AND	CEMENTI	NG RECOR	D	· · · · · · · · · · · · · · · · · · ·			
HOLE SIZE	CA	SING & TUBING SIZE			DEPTH SET			SACKS CEMENT			
	-							<u> </u>			
								+		· · · · · ·	

. TEST DATA AND REQUE	ST FOR A	LLOW	RLI	7.				1	<u> </u>		
OIL WELL (Test must be after					be equal to or	exceed top allo	wable for thi	s depth or be	for full 24 how	rs.)	
Date First New Oil Run To Tank	Date of Te		,			thod (Flow, pu					
								100 100	Choke Size		
Length of Test	Tubing Pre	Tubing Pressure				Casing Pressure			Choke Size		
Actual Prod. During Test	Oil Dhia				Water - Bbls.			Gas- MCF			
Actual Float During Fest	Oil - Bois.	Oil - Bbls.									
GAS WELL	_ 		-		J						
Actual Prod. Test - MCF/D	Length of	Test			Bbls. Conden	sate/MMCF		Gravity of C	Condensate		
esting Method (pitot, back pr.)	Tubing Pre	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size		
VI. OPERATOR CERTIFIC	'ATE OF	COMP	TTA	NCF				1		· ·	
	· -	-		INCL	(DIL CON	ISERV	ATION	DIVISIC)N	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above				Data Approved JUL 1 8 1880							
is true and complete to the best of my					Date	Approve	ď '	ANT T	3 1000		
10 1.						pp. 010					
Mount Dolle				By ORIGINAL SIGNED BY JERRY SEXTON							
Signature		78	~~~	+	- (24.0		TABLESE.		- "	
Donna Holler Printed Name			gen Title	<u> </u>	Title						
6/29/90		05-393			ll me.						
Date		Teles	nhone	No.	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.

RECEPTED

JUL 3 1990 OCD HOBBS OFFICE