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

State of New Mexico Energy, Minerals and Natural Resources Department

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

DISTRICT II
P.O. Drawer DD, Artesia, NM \$8210

OIL CONSERVATION DIVISION

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

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Operator	TO TRANSPORT OIL AND NATURAL GAS									API No.			
Hal J. Rasmussen Ope	Hal J. Rasmussen Operating, Inc.							30-025-69355					
Address													
Six Desta Drive, Su	ite 585	0, Mid	lland	d, Tex	as								
Reason(s) for Filing (Check proper box) New Well		Change in	Tane	order of		☐ Oa	es (Please expl	zin)					
Recompletion	Oil		Dry G		X								
Change in Operator		q Car 🔲]								
I change of operator give name						-			····				
and address of previous operator						 							
II. DESCRIPTION OF WELL AND LEASE Lease Name Well No. Pool Name, Including Formation Kind of Lease Le													
State A A/C 1	13 Jalmat Ta				Tan	insill yt Seven			(Lease No. Federal or Fee				
Location			1				10 00.0	RVIS					
Unit Letter H	198	80	Feet F	From The	No	rth Un	e and	660 Fe	et From The	East	Line		
Section 1/ Township	. 2 ·	3 S			36	E		Lea			_		
Section 14 Township		<i>J</i> 5	Range		-	- , N	МРМ,	Lea			County		
III. DESIGNATION OF TRANS	SPORTE	R OF O	IL A	TAN DY	UR	AL GAS							
Name of Authorized Transporter of Oil or Coodensale Address (Give address to which approved copy of this form is to be sent)											int)		
None of Authorized Transported Carlotter & C.													
Name of Authorized Transporter of Casinghead Gas or Dry Gas X:					۸ ز ۵	Address (Give address to which approved copy of this form is to be sent) Six Desta Drive, Suite 5800, Midland, Tx 79705					י <i>אי)</i> Ix 79705		
If well produces oil or liquids,	Unit Sec. Tv			wp. Rgc.		Is gas actually connected?		<u>*</u>	When ?				
give location of tanks.	<u> </u>					yes		i					
If this production is commingled with that f IV. COMPLETION DATA	ww suy oth	er!esse or	pool, g	ive commi	ngling	g order num	ber:						
IV. COMPLETION DATA		Oil Well		Gas Well	 -	N 317 H	1	7-5	(5. 5 ·		<u> </u>		
Designate Type of Completion -	· (X)	ION WEN	' ! !	Cas well	l I	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Date Spudded	Date Comp	pl. Ready to	Prod		1	Oal Depth	1	L	P.B.T.D.	<u> </u>	<u> </u>		
						* - O'I'G - D							
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation						Top Oil/Gas Pay Tubing Depth							
Perforations						Depth Casing Shoe							
									1	•			
	TUBING, CASING AND					EMENTI	NG RECOR	D					
HOLE SIZE	CASING & TUBING SIZE						DEPTH SET	 	ļ	SACKS CEMENT			
						•							
					\dashv	· · · · · · · · · · · · · · · · · · ·	····		-				
	 				\dashv				 	 .			
V. TEST DATA AND REQUES	T FOR A	LLOW	ABLE	<u> </u>				· · · · · ·	'				
OIL WELL (Test must be after re	,		of load	loil and m						for full 24 how	rs.)		
Date First New Oil Run To Tank	Date of Test				P	Producing Method (Flow, pump, gas lift, etc.)							
Length of Test	Tubing Pressure					Casing Press	ure		Choke Size	Choke Size			
					_								
Actual Prod. During Test	Oil - Bbls.				ν	Water - Bbls.			Gas- MCF				
	<u></u>	:						·	<u> </u>				
GAS WELL Actual Prod. Test - MCF/D	II anak ar	Test			15	Na Conda	cote A O A C E		1Cmvivi of	Sandannia.			
Acual Floir for - Mci/D	Length of Test				"	Bbls. Condensate/MMCF			Gravity of Condensate				
Testing Method (pitot, back pr.) Tubing Pressure (Shut-in)					- c	Casing Pressure (Shut-in)			Choke Size				
									İ				
VL OPERATOR CERTIFIC.	ATE OF	COME	LIA	NCE			011 001	10501	47.01.	D.V. (1016			
I hereby certify that the rules and regulations of the Oil Conservation						OIL CONSERVATION DIVISION							
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.						Deta Approved DEC 1 8 1989							
	0					Date	Approve	d		1 0 100			
Ja Cant						·	A						
Signature Acoust						By ORIGINAL SIGNED BY JERRY SEXTON							
Jay Cherski Agent Printed Name Title					·	SUPERVISOR							
12/11/89	9	15-687	-166		.	Title		 					
Date		Tele	phone	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.

RECEIVED

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