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Appropriate District Office
DISTRICT 1
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

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

	T	TRA	NSP	ORT OIL	AND NAT	URAL GAS	<u>S</u>	No.			
erator						Well API No.					
Clayton W. Williams, Jr., Inc.						30-025-09392					
dress Six Desta Drive, Suite 3	nnn Midla	and. To	xas 7	9705							
Six Desta Drive, Suite 3 ason(s) for Filing (Check proper box)	ooo, mar		7	<u></u>	XX Other	(Please explai	n)				
w Well	C	hange in	Transp	orter of:	effective	a July 1, 1	1991				
completion	Oil		Dry G	_							
ange in Operator XX	Casinghead		Conde	_					7070	<u> </u>	
hange of operator give name Ual	J. Rasmus	sen Ope	eratir	ng Inc., S	ix Desta	Drive, Suit	te 2700, N	Midland, 1	exas 79/0	5	
address or brevious obstance											
	DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including					g Formation (Pro Gas) Kind of					
case Name		26	1	mat Tansi]			State, i	Seedannak once Flore			
State A A/C 1			<u> </u>								
Unit LetterG	: 1650)	_ Feet F	rom The	North Line	and1	.650 Fe	et From The _	East	Line	
Omi Deuzi										County	
Section 23 Townsh	i p 23S		Range	<u> </u>	36E , N	иРМ,	Lea				
I. DESIGNATION OF TRAP	ic n/\DTC E	OF O	TT AT	ND NATII	RAL GAS						
I. DESIGNATION OF TRAC ame of Authorized Transporter of Oil	13PURIER	or Conde	D STATE	XXX	Address (Giv	e address to wh	ich approved	copy of this fo	orm is to be se	nt)	
Texas New Mexico Pipe				~~~	Box	42130 Hou	ston. Tex	as 77242			
ame of Authorized Transporter of Casis	ighead Gas		or Dr	y Gas XX	Address (Giv	e address to wh	rick approved	copy of this fo	orm is to be se	<i>rd)</i> 705	
Xcel Gas Company			_,			a Drive, Su	uite 5700.		, <u>lexas /9</u>	705	
well produces oil or liquids,	Unit	Sec.	Twp.	Rge	is gas actuali	y connected?	l wuen	ŗ			
ve location of tanks.	4		ــــــــــــــــــــــــــــــــــــ		ing order num						
this production is commingled with the	t from any other	er lease of	r pooi, į	Sine community	TER CITIES TRANS						
V. COMPLETION DATA		Oil We	11	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	1 - (X)		- i	G 22 ******	i	i	<u>i </u>	<u>i</u>	1	_L	
Pate Spudded	Date Comp	Date Compl. Ready to Prod.				Total Depth			P.B.T.D.		
	_				T 010 N			T. L. Dooth			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Form				OE.	Top Oil/Gas Pay			Tubing Depth			
	<u> </u>	_ · · · · ·						Depth Casil	ng Shoe		
erforations								•			
		TIRINIC	. CA	SING AND	CEMENT	ING RECOF	SD CS				
UOLE 0175	0.0000 a 71000 C175				DEPTH SET			SACKS CEMENT			
HOLE SIZE		Ozdilo Prositional									
								_ 			
V. TEST DATA AND REQUIDED WELL (Test must be after	EST FOR A	ALLOV	VABL	.E .d.ail.aad.au	n he amal to	ne exceed too al	Llowable for th	is depth or be	for full 24 ho	urs.)	
			ne oj lo	aa ou ana mu	Producing !	Method (Flow, p	pump, gas lift,	etc.)			
Date First New Oil Run To Tank	First New Oil Run To Tank Date of Test										
Length of Test	Tubing Pr	Tubing Pressure				sure		Choke Size			
Foreight of same								Gas- MCF			
Actual Prod. During Test	ctual Prod. During Test Oil - Bbls.					is.					
								_1			
GAS WELL					180 - 3	ensate/MMCF		Gravity of	Condensate		
Actual Prod. Test - MCF/D	Length of	Length of Test				EI SHE MIMIC!		Cierny or Section			
	- We e	Tubing Pressure (Shut-m)				Casing Pressure (Shut-in)			Choke Size		
Testing Method (pitot, back pr.)	Tubing P										
VI. OPERATOR CERTIF I hereby certify that the rules and re Division have been complied with is true and complete to the best of	egulations of the	e Oil Cor ormation	nservati given a	00	Da	OIL CO		AOITAV	DIVISI	ON 191	
Donethia	0				_	കുമാകൾ	A: SICNE	BY JEPS	Y SEXTON		
	yman	2			∥ Ву		rational i	FUPERVE	OR		
Signature Dorothea Owens	Regul	atory /			.					24	
Printed Name				itle	Tit	le					
June 7, 1991	(915)	682-63	324 Tele	oss No.	-						
Data			1 and		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

JUN 2 6 1991

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