Submit 5 Copies Appropriate District Office <u>DISTRICT 1</u> P.O. Box 1980, Hobbs, NM 88240

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DISTRICT II

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

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

## 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

<b>REQUEST FOR ALLOV</b>	VABLE AND AUTHORIZATION
TO TRANSPORT	OIL AND NATURAL GAS

Operator								Well	API No.	•	<u> </u>		
Dawson Operating	Company							1	30-025-1	.0510 🗸			
Address	11 1 m												
P.O. Box 403, Mic Reason(s) for Filing (Check proper box	<u>dland, T</u>	<u>x 797(</u>	<u>J2</u>			en (Dianaa		· · · · · · · · · · · · · · · · · · ·					
	•/	Change in Transporter of:											
Recompletion	Oil		Dry G	<u> </u>	Eff	ective	e 4-1	-93					
Change in Operator	Casinghes	d Gas	Conde										
If change of operator give name	C & D O			<u>-</u>	P.O. Box	5026	 Чо	bbs,	NM 8824		<u> </u>		
• •			10 00	<u>, , , , , , , , , , , , , , , , , , , </u>	<u>1.0.</u> DOX		<u> </u>		<u>11 002</u> -	<u>, 1</u>			
II. DESCRIPTION OF WEL	L AND LE	Well No.	Boot b	Jama Includ	ing Romation			W:- 4	- <u>()</u>	<u> </u>	ease No.		
New Mexico M State	2	· · · · · · · · · · · · · · · · · · ·											
Location	<u> </u>	<u>20 Langlie Mattix Seven Rivers</u> Queen Greygerg									134		
Unit Letter F	. 10	980			North Lin	· · · · ·	980	r	et From The	Wast			
	•	/00	. rea r	TOTA INC		e and		P	et Promi The	MESL	Line		
Section 29 Town	uship 2.2.5	5	Range	37E	, N	MPM,	Lea		<b>.</b>		County		
III. DESIGNATION OF TRA	NCDODTE	DORO	TT A N			TATT	COTTO	י דידר די	r				
Name of Authorized Transporter of Oil		or Conden						N WEL	copy of this f	orm is to be s	eni)		
					1								
Name of Authorized Transporter of Ca	singhead Gas		or Dry	Gas 🛄	Address (Giv	e address i	o which	approved	copy of this f	orm is to be s	ent)		
	1 22 25 1							<u> </u>					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge. 	Is gas actually	y connecte	d?	When	?				
If this production is commingled with th	at from any oth	er lease or	1 1000  . 91	ve comming	ling order num				····-,		•		
IV. COMPLETION DATA			Po, B.										
		Oil Well		Gas Well	New Well	Workova	er	Deepen	Piug Back	Same Res'v	Diff Res'v		
Designate Type of Completic		1						-	İ	İ.	İ		
Date Spudded	Date Comp	ol. Ready to	Prod.		Total Depth				P.B.T.D.				
					Top Oil/Gas 1	201							
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation									Tubing Depth				
Perforations					L				Depth Casing Shoe				
	T	UBING,	CASI	NG AND	CEMENTI	NG REC	ORD		•				
HOLE SIZE	CAS	CASING & TUBING SIZE				DEPTH SET				SACKS CEMENT			
					<u> </u>								
			<del>.</del>		<u> </u>				<u>↓</u>				
V. TEST DATA AND REQU	EST FOR A	LLOWA	BLE	· · · · · · · · · · · · · · · · · · ·	1				1	a,			
OIL WELL (Test must be after				oil and must	be equal to or	exceed top	allowal	ble for this	t depth or be f	or full 24 hou	ers.)		
Date First New Oil Run To Tank	Date of Tea				Producing Me								
								T					
Length of Test	Tubing Pres	Tubing Pressure			Casing Pressure				Choke Size				
Actual Prod. During Test	rod. During Test Oil - Bbls.				Water - Bbis.				Gas- MCF				
				Water - Dois.									
GAS WELL					1	<del></del>		<u> </u>	A	·			
Actual Prod. Test - MCF/D	Length of 1	ent			Bbls. Condens	ate MMC	<u>-</u>	<u> </u>	Gravity of C	ondensate			
Fosting Method (pitot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shui-in)			Choke Size						
					ļ								
VI. OPERATOR CERTIFI	CATE OF	COMP	LIAN	ICE					*				
I hereby certify that the rules and reg	ulations of the (	Dil Conserv	ntion		C		ONS	ERV	ATION I	DIVISIC	N		
Division have been complied with an	d that the inform	nation give	n above	:					$i \sim \lambda$	27 19	50		
is true and complete to the best of m	Enowledge an	d beliet.			Date	Approv	ved .				<u> </u>		
CIX A						••							
Signature					Bv_	i z Crhy	1.20	Carlos Inc.					
Signature Joe R. Dawson	Vi	ce Pres	side	nt	,	4	× 🗶	i <del>na za</del> Gi katika	<u>ितिहरू 5</u> ई चित्रकारीह	XTON			
Printed Name			Title		Title_			2. J.	≝ : 1999 (B) 				
<u>5-6-93</u> Date	91	5-699-	1444 mbone N										
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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.