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

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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

DECLIEST FOR ALLOWARIE AND AUTHORIZATION

| O Rio Brazos Rd., Aziec, NMI 87410 | REQU | IEST FO | IA AC | | OWABL | LE ANU AI | URAL GAS | 5 | | | | |
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| | | IO INA | INOP | <u> </u> | ,, 0,,, | | ND NATURAL GAS Well API No. | | | | | |
| ator Clayton W. Williams, Jr. | . Inc. | | | | | | | 30-02 | 5-10714 | | | |
| | , 11101 | | | | | | | | | | | |
| ress Six Desta Drive, Suite 3 | 000, M id | land, Te | xas 7 | 797 | 05 | | | | | | | |
| son(s) for Filing (Check proper box) | | | | | | 14.54 | (Please explain | | | | | |
| Well | | Change in | | | r of: | effective | y July 1, 1 | .991 | | • | | |
| ompletion | Oil | | Dry G | | | | | | | | | |
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| ange of operator give name | J. Rasmu | ussen Ope | erati | ng | Inc., S | ix Desta (| rive, Suit | e 2700, N | lidland, I | exas /9/0 | <u> </u> | |
| address or biesions obsissor | | | | | | 4 | | | | | | |
| DESCRIPTION OF WELL | AND LE | ASE | Da al | N/e in | n Includie | a Formetion | (Pro Gas) | Kind o | Lease | Lea | sa No. | |
| не Мати | | W 611 140. | | | | 1 Yt Seve | | State, a | Sendamonik om x 1900 | | | |
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| Services 14 Townsh | | 23S | Rang | le. | 36E | , NN | лРМ, | Lea | | | County | |
| Section 14 Townsh | <u> </u> | | | | | | | , | | | | |
| . DESIGNATION OF TRAI | NSPORT | ER OF C | IL A | ND | NATUI | RAL GAS | | | 6.1.6 | | -() | |
| I. DESIGNATION OF TRAI | | or Coade | so sarte | | XX | | e address to wh | uch approved | copy of נאניקד האניקדי | ## 12 10 0€ SE | -, | |
| Texas New Mexico Pipeline Co. | | | | | | Box 42130, Houston, Texas 77242 Address (Give address to which approved copy of this form is to be sent) | | | | | | |
| ame of Authorized Transporter of Casi | ghead Gas | | or D | ту С | ias XX | Address (Giv | e address to wh | uch approved | copy of this f | orm us to be se Tavae 70 | ~-, 705 | |
| Xcel Gas Company | | | | | | | a Drive, Su | | | , IEAGS / 3 | | |
| well produces oil or liquids, | Unit | Sec. | Twp | . | Rge. | is gas actuali | y connected? | When | : | | | |
| e location of tanks. | _ <u></u> | <u> </u> | | | L | | | | | | | |
| this production is commingled with the | from any | niner lease o | r pool, | give | comming | ing order our | ber: | | | | | |
| V. COMPLETION DATA | | · | <u> </u> | | | <u>,</u> | | - · | Plug Back | Same Res'v | Diff Res | |
| | | Oil We | :11 | G | as Well | New Well | Workover | Deepen | 1 ring been | 1 | ĺ | |
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| ate Spudded | Date Co | Date Compl. Ready to Prod. | | | | i crei rebui | | | 1 | • | · | |
| | | Name of Producing Formation | | | | | Top Oil/Gas Pay | | | Tubing Depth | | |
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| <u> </u> | | | | | | | | | Depth Casi | ng Shoe | | |
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| | | 771001 | C C | (cn | NC AND | CEMENT | ING RECOR | <u> </u> | | | | |
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| V. TEST DATA AND REQU | FST FOI | RALLO | WAB | LE | | | | | | | | |
| | er recovery | of total volu | me of l | oad | oil and mu | si be equal io | or exceed top a | llowable for t | his depth or b | e Jor Juli 24 AC | , | |
| OIL WELL (Test must be after Date First New Oil Run To Tank | Date of | | | | | Producing | Method (Flow, | p ump , gas lift | , elC.) | | | |
| DETECTION OF LAND TO JOHN | | - | | | | | | | Choke Si | ze | | |
| Length of Test | Tubins | Pressure | | | | Casing Pre | ESLIE | | CHORE SI | | | |
| Peniin or 1999 | | | | | | | | | Gas- MC | Gas- MCF | | |
| Actual Prod. During Test | Oil - E | Oil - Bbis. | | | | | Water - Bbis. | | | | | |
| Virgin Line Parint 1444 | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| GAS WELL | 11 4=00 | of Test | | | | Bbis. Con | ensue/MMCF | | Gravity o | (Condensate | | |
| Actual Prod. Test - MCF/D | Lengu | | | | | | | | | | | |
| | Tubin | Tubing Pressure (Shut-m) | | | | | Casing Pressure (Shus-in) | | | Choke Size | | |
| sting Method (pitot, back pr.) | | | | | | | | | | | | |
| <u> </u> | | OF CO | MOT | TA | NCF | | | | /ATIO | יו הוגיוכ | ION | |
| VL OPERATOR CERTIF | ICAIE | OF CO. | VILL | , <u>,,,,,</u> | 1401 | | OIL CC | NSER | VATIO | N DIVIS | ION | |
| والمحم ممايت بالمراج في المراج | | f the Cil C | MINEL VA. | ш | | 11 | | i | 111 1 Q | 1991 | | |
| I hereby certify that the rules and in Division have been complied with is true and complete to the best of | | (III) CA II III CA | | | - | D- | ate Approv | ved J | OF TO | 1001 | · | |
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| | en on | juen | | | | · By | / | METALLET I | | - W | | |
| Signature Dorothea Owens | Red | ulatory | <u>Analy</u> | y s t | | - | | | | | | |
| Printed Name | | | | Title | | Ti | tle | | | | | |
| June 7, 1991 | (91 | 5) 682-6 | 324 | | | - 11 | | | | | | |
| Date | | | Telep | bos | s 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
- 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.

JUN 26 1991