STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION P. O. BOX 2088 SANTA FE, NEW MEXICO 87501

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Form C-104 Revised 10-01-78 Format 08-01-83 ** Page 1

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator						
Caspen Oil, Inc.						
300 Crescent Court, Suite 1100, Dallas, Te	exas 75201					
Resson(s) for filing (Check proper box) New Well Change in Transporter of: Responsibilition Oil	Other (Please explain) Change of Operator's Name (Corporate Name Change)					
and address of previous owner	y, Inc 300 Crescent Court, Suite 1100, Dallas, Texas 75201					
II. DESCRIPTION OF WELL AND LEASE Lease Name Gulf Drinkard 1 Brunson Drink	ard-Abo, S. State, Federal or Fee fee					
Location Unit Letter M : 660 Feet From The South Line and 660 Feet From The West County						
Line of Section 30 Township 225 Range 38	E , NMPM, Lea					
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURA						
Gitgo Petroleum Corp. TX NM Pipele e Name al Authorized Transporter of Casinghead Cas a or Dry Cas	P. O. Box 3758, Tulsa, Ok. 74102 Address (Give address to which approved copy of this form is to be sent) 2223 Dodge St. 8th Floor. Omaha. NE. 68102					
If well produces oil or liquide, Unit Sec. 100 225 38E	Is gas actually connected? when Yes 01/13/76					
If this production is commingled with that from any other lease or pool,	, give comminging order number.					

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

hilly anany /Kathy Conaway	
(Signature)	
Production Analyst	_
(Title)	
November 3, 1988	
(Date)	

OIL CONSERVATION DI 1989

APPROVED_

ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR

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TITLE

BY

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I. II. III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.

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IV. COMPLETION DATA

Designate Type of Completi	on - (X)	Oil Well	Cas Well	New Well	Workover	Deepen I	Plug Back	Same Res'v.	Diff. Resty.
Date Spudded	Date Compl. Ready to Prod. T, GR. etc., Name of Producing Formation			Talal Depth Top Oll/Gas Pay			P.B.T.D.		
Elevations (DF, RKB, RT, GR, etc.)							Tubing Depth		
Perforations	- I			-4		·····	Depth Cael	ng Shoe	<u></u>
		TUBING, C	ASING, AN	D CEMENTI	NG RECOR	D	_1	·····	
HOLE SIZE			CKS CEMEN	(T					
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V. TEST DATA AND REQUEST FOR ALLOWABLE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allow OIL WELL able for this depth or be for full 24 howe)

Date of Test	Producing Method (Flow, pu	Producing Method (Flow, pump, ges lift, ric.)		
Tubing Pressure	Casing Pressure	Choks 511.	<u> </u>	
Oll-Bbis.	Water - Bbls.	Gae - MCF		
	Tubing Pressure	Tubing Pressure Casing Pressure	Tubing Pressure Casing Pressure Choke Size	

GAS WELL

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Actual Prod. Test-MCF/D	Length of Test	Bbis. Condensate/MMCF	Gravity of Condensate
Testing Method (pital, back pr.)	Tubing Presewe (Shut-in)	Casing Pressure (Shut-12)	Choke Size