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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

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

Operator	'	O INA	NOFUE	11 OIL	או טווא	UNALUA	Well A	PI No.			
Clayton W. Williams, Jr.	. Inc.						j	25-20973			
Address	, ,,,,,,						30-0				
Six Desta Drive, Suite 3	000, Mid1	and, Tex	cas 797	05							
Reason(s) for Filing (Check proper box)					XX Othe	t (Please expla	iin)				
New Well		Change in T	Transporte	r of:	effectiv	e July 1,	1991				
Nuossi gletion	Oil	<u></u> ı	Dry Gas	ال		•					
Change in Operator XX	Casinghead	Gas 🗌 🤇	Condensa	ie 📋					**·		
change of operator give name Hall	J. Rasmus	sen Oper	rating	Inc., S	Six Desta	Drive, Sui	te 2700,	Midland,	Texas 7970	05	
no accress or previous operator			 .								
I. DESCRIPTION OF WELL	AND LEA		5		F	·	Viada	of Lease		ease No.	
Lease Name					ng Formation (•		n lease Bedmankanklik	1	Mase (N).	
State A A/C 1		105	Jalmat	lansı	11 Yt Seve	n RVrs					
Location H		2080			Jorth	A	560 E-	et From The .	Fast	•	
Unit Letter	_ :	2000	Feet From	The	Line	and	Fe	et From 179.		Line	
Section 23 Townshi	p 23S		Range	;	36E . N	ирм,	lea -			County	
John 20 Townsii					1						
II. DESIGNATION OF TRAN	SPORTE	R OF OI	L AND	NATUI	RAL GAS		<u> </u>		·		
Name of Authorized Transporter of Oil		or Condens	ate	(X)	Address (Giv	e address to wi	hich approved	copy of the J	form is to be se	ini)	
Texas New Mexico Pipeli	ne Co.		<u> </u>	···		2130, Hous					
Name of Authorized Transporter of Carin	ghead Gas		or Dry G	IS XX		e address to w					
Xcel Gas Company						a Drive, S	uite 5700	, Midland	, Texas 79	705	
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge.	is gas actuali	y connected?	When	?			
pive location of tanks.	11	1	1								
f this production is commingled with that	from any oth	er lease or p	bool, give	commingi	ing order num						
IV. COMPLETION DATA		Oil Well		s Weil	New Well	Workover	Despet	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion	- (X)	I OII MEII	Ga	a well	Hem well	WOILOVEI	Lespen	1 1108 2302			
Date Spudded		Date Compl. Ready to Prod.				Total Depth			P.B.T.D.		
2— 2		•									
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas	Pay		Tubing Depth			
Perforations								Depth Casi	ng Shoe		
TUBING, CASING ANI					CEMENTI				SACKS CEMENT		
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET				SACKS CEMENT		
	+										
	 										
	+				-						
V. TEST DATA AND REQUE	ST FOR A	LLOWA	BLE		·			<u> </u>			
OIL WELL (Test must be after	recovery of to	stal volume o	of load oil	l and musi	be equal to or	exceed top all	lowable for th	is depth or be	for full 24 ho	iers.)	
Date First New Oil Run To Tank Date of Test					Producing M	ethod (Flow, p	ump, gas lift,	elc.)			
	Tubing Pressure										
Length of Test					Casing Press	пис		Choke Size			
								Gas- MCF			
Actual Prod. During Test Oil - Bbls.					Water - Bbls	•		OZS- MICI	<u> </u>		
					<u> </u>						
GAS WELL					· · · · · · · · · · · · · · · · · · ·	A		10	Condenser		
Actual Prod. Test - MCF/D	Prod. Test - MCF/D Length of Test					nsate/MMCF		Gravity of Condensate			
	lethod (pilot, back pr.) Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
Testing Method (pilot, back pr.)											
											
VL OPERATOR CERTIFIC				CE		OIL CO	NSERV	ATION	DIVISION	ON	
I hereby certify that the rules and regu	lations of the	Oil Conser	vation		11				20.00		
Division have been complied with and is true and complete to the best of my	n unat the info knowledge =	rmauon give and belief	en abovê			_	٠.	: :	1991.		
is the and complete to the seat of my	Thomsone a	un oura.			Date	Approv	ed action	24 (800)	Y SEZTON		
Donather &	2110 = .				11		Marieur:				
Signature	wen	-			∥ By_	*.					
Dorothea Owens	Regula	tory Ana									
Printed Name			Title		Title	.					
June 7, 1991	(915)	682-6324	enhane No								

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.

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