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LAND OFFICE		 	↓
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	GAS		<u> </u>
OPERATOR		<u> </u>	 _ _
PRORATION OFFICE			1

DISTRIBUTION NTA FE	REQUEST FOR	SERVATION COMMISSION R ALLOWABLE ND	Form C-104 Supersedes Old C-104 and C-110 Effective 1-1-65
S.G.S.	AUTHORIZATION TO TRANSF	PORT OIL AND NATURAL GAS	S
AND OFFICE			
RANSPORTER GAS			
PERATOR			
RORATION OFFICE			
Imperial-American	Management Company		
507 Midland Saving	s BldgMidland, Texas	Other (Please explain)	
eason(s) for filing (Check proper box)		Other (Please explain)	
ew Well	Change in Transporter of: Otto	Effective Ja	anuary 1,1970
ecompletion	0,1		
hange in Ownership	Casinghead Gas Condensati		
change of ownership give name d address of previous owner			
ESCRIPTION OF WELL AND LE	EASE Well No. Pool Name, Including Form	nation Kind of Lease	Lease No.
ease Name		State, Federal	or Fee Federal NM029029-
Sims Federal		660	East
Unit Letter A : 660	O Feet From The North Line of	and 660 Feet From T	ne
Unit Letter			Lea County
Line of Section 7 Town	ship 22-S Range	20-E	
	ER OF OU. AND NATURAL GAS	Address (Give address to which approv	ed conv of this form is to be sent)
DESIGNATION OF TRANSPORTED Name of Authorized Transporter of Oil	er of oil and natural gas	Address (Give address to which approv	_
	·	Box 3119-Midland. Address (Give address to which approv	Texas ed copy of this form is to be sent)
Name of Authorized Transporter of Cash	nghead Gas or Dry Gas	Address (1) the numbers to District	·
None		Is gas actually connected? Whe	en
If well produces oil or liquids,	Unit sec.	13 943	
	B/G 7 22-S 38-F	ing order number:	
f this production is commingled with	h that from any other lease or pool, g	give comminging order new	Plug Back Same Res'v. Diff. Res'
COMPLETION DATA	Oil Well Gas Well	New Well Workover Deepen	plug Back Sume Ites II
Designate Type of Completion	n - (X)		P.B.T.D.
Date Spudded	Date Compl. Ready to Prod.	Total Depth	
Date operation		Top Oil/Gas Pay	Tubing Depth
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation	100 000	Depth Casing Shoe
Elevations (DF, RKB, RT, GR, etc.,) Perforations			Depth Casing Shoe
Perforations	TUBING, CASING, AND	CEMENTING RECORD	Depth Casing Shoe SACKS CEMENT
		CEMENTING RECORD	
Perforations	TUBING, CASING, AND	CEMENTING RECORD	
Perforations	TUBING, CASING, AND	CEMENTING RECORD	
Perforations HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	CEMENTING RECORD DEPTH SET	SACKS CEMENT
Perforations HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SET DEPTH SET Officer recovery of total volume of load oil seed on the (or full 24 hours)	SACKS CEMENT SACKS CEMENT I and must be equal to or exceed top al
HOLE SIZE TEST DATA AND REQUEST F	TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de	CEMENTING RECORD DEPTH SET	SACKS CEMENT SACKS CEMENT I and must be equal to or exceed top al
Perforations HOLE SIZE	TUBING, CASING, AND CASING & TUBING SIZE	DEPTH SET DEPTH SET Infer recovery of total volume of load of epth or be for full 24 hours) Producing Method (Flow, pump, gas	SACKS CEMENT l and must be equal to or exceed top al lift, etc.)
HOLE SIZE HOLE SIZE TEST DATA AND REQUEST FOIL WELL Date First New Oil Run To Tanks	TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de	DEPTH SET DEPTH SET Officer recovery of total volume of load oil seed on the (or full 24 hours)	SACKS CEMENT SACKS CEMENT I and must be equal to or exceed top al
Perforations HOLE SIZE TEST DATA AND REQUEST FOR WELL	TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de	DEPTH SET DEPTH SET Infer recovery of total volume of load of epith or be for full 24 hours) Producing Method (Flow, pump, gas) Casing Pressure	SACKS CEMENT I and must be equal to or exceed top al lift, etc.) Choke Size
HOLE SIZE HOLE SIZE TEST DATA AND REQUEST FOIL WELL Date First New Cil Run To Tanks Length of Test	TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de	DEPTH SET DEPTH SET Infer recovery of total volume of load of epth or be for full 24 hours) Producing Method (Flow, pump, gas	SACKS CEMENT I and must be equal to or exceed top all lift, etc.)
HOLE SIZE HOLE SIZE TEST DATA AND REQUEST FOIL WELL Date First New Oil Run To Tanks	TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de Tubing Pressure	DEPTH SET DEPTH SET Infer recovery of total volume of load of epith or be for full 24 hours) Producing Method (Flow, pump, gas) Casing Pressure	SACKS CEMENT I and must be equal to or exceed top all lift, etc.) Choke Size
HOLE SIZE HOLE SIZE TEST DATA AND REQUEST FOIL WELL Date First New Cil Run To Tanks Length of Test Actual Prod. During Test	TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de Tubing Pressure	DEPTH SET Depth set	SACKS CEMENT l and must be equal to or exceed top al. lift, etc.) Choke Size Gas-MCF
HOLE SIZE HOLE SIZE TEST DATA AND REQUEST FOIL WELL Date First New Cil Run To Tanks Length of Test Actual Prod. During Teet	TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de Tubing Pressure	DEPTH SET DEPTH SET Infer recovery of total volume of load of epith or be for full 24 hours) Producing Method (Flow, pump, gas) Casing Pressure	SACKS CEMENT I and must be equal to or exceed top al. lift, etc.) Choke Size
HOLE SIZE HOLE SIZE TEST DATA AND REQUEST FOIL WELL Date First New Cil Run To Tanks Length of Test Actual Prod. During Test	TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de Date of Test Tubing Pressure Oil-Bbls.	DEPTH SET DEPTH SET Differ recovery of total volume of load of epth or be for full 24 hours) Producing Method (Flow, pump, gas) Casing Pressure Water-Bbis. Bbis. Condensate/MMCF	SACKS CEMENT l and must be equal to or exceed top al lift, etc.) Choke Size Gas-MCF
HOLE SIZE HOLE SIZE TEST DATA AND REQUEST FOIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D	TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de Date of Test Tubing Pressure Oil-Bbls.	DEPTH SET Depth set	SACKS CEMENT I and must be equal to or exceed top al. lift, etc.) Choke Size Gas-MCF Gravity of Condensate
HOLE SIZE HOLE SIZE TEST DATA AND REQUEST FOIL WELL Date First New Cil Run To Tanks Length of Test Actual Prod. During Teet	TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de Date of Test Tubing Pressure Oil-Bbls.	DEPTH SET DEPTH SET Differ recovery of total volume of load of epth or be for full 24 hours) Producing Method (Flow, pump, gas) Casing Pressure Water-Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in)	SACKS CEMENT I and must be equal to or exceed top all lift, etc.) Choke Size Gas-MCF Gravity of Condensate Choke Size
HOLE SIZE HOLE SIZE TEST DATA AND REQUEST FOIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.)	TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de Tubing Pressure Oil-Bbls. Length of Test Tubing Pressure (Shut-in)	DEPTH SET DEPTH SET Differ recovery of total volume of load of epth or be for full 24 hours) Producing Method (Flow, pump, gas) Casing Pressure Water-Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in)	SACKS CEMENT l and must be equal to or exceed top al. lift, etc.) Choke Size Gravity of Condensate Choke Size VATION COMMISSION
HOLE SIZE TEST DATA AND REQUEST FOIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.)	TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE Test must be a able for this de Date of Test Tubing Pressure Oil-Bbls. Length of Test Tubing Pressure (Shut-in)	DEPTH SET Depth set	SACKS CEMENT I and must be equal to or exceed top all lift, etc.) Choke Size Gas-MCF Gravity of Condensate Choke Size
HOLE SIZE HOLE SIZE TEST DATA AND REQUEST FOIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.) I. CERTIFICATE OF COMPLIANT Length of Control of the control	TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de abl	DEPTH SET DEPTH SET Differ recovery of sotal volume of load of epth or be for full 24 hours) Producing Method (Flow, pump, gas) Casing Pressure Water-Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in) OIL CONSERV	SACKS CEMENT I and must be equal to or exceed top all lift, etc.) Choke Size Gas-MCF Gravity of Condensate Choke Size VATION COMMISSION DECT 5 1969
HOLE SIZE HOLE SIZE TEST DATA AND REQUEST FOIL WELL Date First New Oil Run To Tanks Length of Test Actual Prod. During Test GAS WELL Actual Prod. Test-MCF/D Testing Method (pitot, back pr.) I. CERTIFICATE OF COMPLIANT Length of Control of the control	TUBING, CASING, AND CASING & TUBING SIZE OR ALLOWABLE (Test must be a able for this de Tubing Pressure Oil-Bbls. Length of Test Tubing Pressure (Shut-in)	DEPTH SET DEPTH SET Differ recovery of sotal volume of load of epth or be for full 24 hours) Producing Method (Flow, pump, gas) Casing Pressure Water-Bbls. Bbls. Condensate/MMCF Casing Pressure (Shut-in) OIL CONSERV	SACKS CEMENT l and must be equal to or exceed top al. lift, etc.) Choke Size Gravity of Condensate Choke Size VATION COMMISSION

La Beight	
(Signature)	
Agent	
(Title)	
12 - 12 - 69	

(Date)

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

If this is a request for allowable for a newly drilled or despened 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

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NEW MEXICO OIL CONSERVATION COMMISSION REQUEST FOR ALLOWABLE AND

Form C-104 Supersedes Old C-104 and C-110

Effective 1-1-65 AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS. PRORATION OFFICE Operator IMIERIAL - AMERICAN MANAGEMENT COMPANY Address 507 Midland Savings Bldg.
Reason(s) for filing (Check proper box) Midland, Texas Other (Please explain) Change in Transporter of: New Well Dry Gas Recompletion Condensate Casinghead Gas Change in Ownership X If change of ownership give name and address of previous owner ____ Midland, Texas Box 5596 SOLAR OIL COMPANY Lease No. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation State, Federal or Fee Federal NM029029-E Wantz Abo 4 Sims Federal Location 660 Feet From The Feet From The North Line and 6<u>60</u> Unit Letter County , NMPM, Range 38-E 22-S Township DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Address (Give address to which approved copy of this form is to be sent) or Condensate Name of Authorized Transporter of Oil Box 1713 Midland, Texas

Address (Give address to which approved copy of this form is to be sent) Admiral Crude Oil Name of Authorized Transporter of Casinghead Gas , or Dry Gas Is gas actually connected? Twp. Unit Sec. If well produces oil or liquids, give location of tanks. 22-S 7 B/G If this production is commingled with that from any other lease or pool, give commingling order numbers Same Res'v. Dill. Res'v. Plug Back Workover New Well A COMPLETION DATA Gas Well Oll Well Designate Type of Completion - (X) P.B.T.D. Total Depth Date Compl. Ready to Prod. Tubing Depth Top Oil/Gas Pay Name of Producing Formation Elevations (DF, RKB, RT, GR, etc.) Depth Casing Shoe TUBING, CASING, AND CEMENTING RECORD SACKS CEMENT DEPTH SET CASING & TUBING SIZE HOLE SIZE (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours) V. TEST DATA AND REQUEST FOR ALLOWABLE Producing Method (Flow, pump, gas lift, etc.) OIL WELL Date of Test Date First New Oil Run To Tanks Choke Size Casing Pressure Tubing Pressure Length of Test Gas - MCF Water - Bble. Oil-Bble. Actual Prod. During Test Gravity of Condensate Bbls. Condensate/MMCF GAS WELL Length of Test Actual Prod. Test-MCF/D Choke Size Casing Pressure (Shut-in) Tubing Pressure (Shut-in) Testing Method (pitot, back pr.) OIL CONSERVATION COMMISSION VI. CERTIFICATE OF COMPLIANCE APPROVED I hereby certify that the rules and regulations of the Oil Conservation Commission have been complied with and that the information given above is true and complete to the best of my knowledge and belief. SUPERVISOR DISTRICE

(Signature)	
Area Manager (Title)	_

October 24, 196 1969

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