Submit 5 Copies
Appropriate District Office
DISTRICT 1
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., Aztec, NM 87410

1

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

I.	٦	TO TRA	NSF	ORT OIL	_ AND NA	TURAL GI	<u>45</u>	151 N=				
Operator	erator								Well API No. 30-025-24254			
Dawson Operating	g Compa	ny										
Address P. O. Box 403,	Midlan	d, Tex	cas 7	79702								
Reason(s) for Filing (Check proper box)					On	et (Please expli	ain)					
ew Well Change in Transporter of:												
Recompletion	Oil Casinghead		Conde									
If change of operator give name and address of previous operator B C	& D Oi	1 & Ga	as Co	orp., P	. U. BOX	. 3920	nobbs j	11. 00				
IL DESCRIPTION OF WELL.	Ftlos	e Econotica Kind			of LessoState Lesso No.							
Lesse Name New Mexico M State	I CE I I I I i a Matti v Covan Pivers								B-9.	34		
Queen Greyberg												
Unit Letter K : 2630 Feet From The South Line and 1330 Feet From The West Line												
	Count									County		
Section 29 Township	22S		Range	37.	<u>, , , , , , , , , , , , , , , , , , , </u>	1711 171,						
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS												
Name of Authorized Transporter of Oil or Condensate										·-/		
Texas New Mexico Pipe	P. U. E	P. O. Box 60628, Midland, Texas 79711 Address (Give address to which approved copy of this form is to be sent)										
tille of Authorized Hamponia of Camping								ulsa, Oklahoma 74102				
Texaco Expl. & Prod., If well produces oil or liquids,								When?				
if well produces on or inquial,	i c	29	Twp. 22S	37E	Υe	Yes			10-28-72			
f this production is commingled with that f	rom any othe	r lease or	pool, gi	ive comming	ing order mun	ber:						
V. COMPLETION DATA							Deepen	Plug Back	Same Res'v	Diff Res'v		
Designate Time of Completion	· 00	Oil Well		Gas Well	New Well	Workover	l Deebea	110g 25cm				
Designate Type of Completion -		Ready to	Prod.		Total Depth	<u> </u>	J	P.B.T.D.				
Date Spudded Date Compl. Ready to Prod.												
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Cas Pay			Tubing Depth				
								Depth Casing Shoe				
Perforations	,											
TUBING, CASING AND						NG RECOR	D					
11015 0175	CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT				
HOLE SIZE	CACIFG & TODING DIE											
								 				
. TEST DATA AND REQUES	TEODA	LLOW	ARLE									
V. TEST DATA AND REQUES OIL WELL (Test must be after re	covery of low	al volume	of load	oil and must	be equal to or	exceed top allo	mable for this	depth or be for	or full 24 hou	rs.)		
Date First New Oil Run To Tank	Date of Test				Producing M	ethod (Flow, Fu	mp, gas iyi. e	sc.)				
	Tubing Pressure				Casing Pressure			Choke Size				
Length of Test												
	Oil - Bbls.				Water - Bbis	Water - Bbls.			Gas- MCF			
Actual Prod. During Test	Olf - Bois.											
	L											
GAS WELL Actual Prod. Test - MCF/D	Length of Test				Bbis. Condensate/MMCF			Gravity of Condensate				
Actini Flor Tex - Metho	Language of the same							Choke Size				
sting Method (pitot, back pr.) Tubing Freezure (Shut-in)					Casing Pressure (Shut-in)							
					ļ			1				
VI. OPERATOR CERTIFICA	ATE OF	COMP	'LIAI	NCE	(OIL CON	ISERV	ATION [DIVISIO	N		
t hereby certify that the rules and regulations of the Oil Conservation												
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.					Deta	Approve	d ·		1566			
is true and complete to the best of thy provisely and belief.						Apploto	u					
Vis f //www					D.,	By ORIGINAL ANNIE & CORY SEXION						
Signature Vice President					by -	By SWIFE COR						
Joe R. Dawson Vice Fleshdene					Title					<u>,</u>		
Printed Name 5-6-93	91	5-699-		1	Illie							
Date			phone						<u></u>			

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.