HO. OF COPIES RECE	1460	<u></u>	
DISTRIBUTION			Γ
SANTA FE			_
FILE			Γ
U.S.G.S.			Γ
LAND OFFICE			Γ
THANSPORTER GAS			
			Γ
OPERATOR			Γ
PRORATION OFFICE			Γ
Operator	•		_
Estoril Pro	duci	na (	7

## NEW MEXICO OIL CONSERVATION COMMISSION

orm C-1	04		
upersed	es Old C	104 and	C-110
Effective	1-1-65		

SANTA FE		REQUEST	FOR ALLOWABLE	Supersedes Old C-104 and C-116 Effective 1-1-65
U.S.G.S.		AUTHORIZATION TO TRA	AND NATURAL C	
LAND OFFICE		AUTHORIZATION TO TRA	INSPORT OIL AND NATURAL G	A3
THANSPORTER OIL		<b></b>		
GAS		4		
PRORATION OFFICE	_	_		
Operator				
Estoril Producin	ıg Cor	poration		
400 W. Illinois	#1600	, Midland, Texas 79701		
Reason(s) for filing (Check po	roper oos	Change in Transporter of:	Other (Please explain)	
Recompletion		OII Dry Ga	s 🔯	
Change in Ownership		Casinghead Gas Conder		5
If change of ownership give and address of previous ow				
DESCRIPTION OF WEL	L AND		ormation Kind of Lease	Lease No.
Belco Federal		Well No. Pool Name, Including For Antelope Ridge		Federal 13641
Location		1   Ancetope Kluge	= Sciawii (Gas)	receial   13041
Unit Letter O	76	60 Feet From The South Lin	e and 1980 Feet From 1	rhe East
Line of Section 15	Τc	ownship 23S Range 3	34E , nmpm,	Lea County
2 o. occion 15		many adv many	y 177711 101g	In County
DESIGNATION OF TRA		etter of oil and natural ga	Address (Give address to which approv	ved copy of this form is to be sent)
Name or Authorized Transpor	nter of Co	rsinghead Gas or Dry Gas 🔀	Address (Give address to which approv	ved copy of this form is to be sent)
Gas Company of N			P.O. Box 26400, Albuque	erque. N.M. 87125
If well produces oil or liquid		Unit   Sec.   Twp.   Rge.	Is gas actually connected? Whe	
give location of tanks.		G 15 23S 34E	Yes 3-	-7-81
If this production is commi	ngled w	Oil Well Gas Well	give commingling order number: New Well Workover Deepen	Plug Back   Same Res'v.   Diff. Res'v.
Designate Type of C	ompleti			
Date Spudded		Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
Elevations (DF, RKB, RT, G	R, etc.j	Name of Producing Formation	Top Oil/Gas Pay	Tubing Depth
Perforations			<u> </u>	Depth Casing Shoe
			D STUBLISHED DESCRIP	
HOLE SIZE		CASING & TUBING SIZE	D CEMENTING RECORD	SACKS CEMENT
HOLE SIZE		CASING & TOBING SIZE	02.11102.	
TEST DATA AND REQUOIL WELL	UEST F		ifter recovery of total volume of load oil. epth or be for full 24 hours)	and must be equal to or exceed top allow
Date First New Oil Run To T	ank s	Date of Test	Producing Method (Flow, pump, gas li)	fi, esc.)
				Choke Size
Length of Teet		Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test		Oil-Bble.	Water - Bble.	Gda • MCF
			<u> </u>	
GAS WELL		L. Abril Trans	Bbis. Condensate/MMCF	Gravity of Condensate
Actual Prod. Test-MCF/D		Length of Test	Bois. Condensate/MMCF	Gravity of Condensate
Testing Method (pitot, back	pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
CERTIFICATE OF COM	APLIAN	NCE	OIL CONSERVA	TION COMMISSION
		-		<u> 7 1986</u>
I hereby certify that the ru	iles and	regulations of the Oil Conservation	11	L
Commission have been co	molied	with and that the information given he best of my knowledge and belief.	BY ORIGINAL SIGNED BY	JERRY SEXTON
The same and analysis	<b>- ···</b>	• • • •	TITLE DISTRICT I SUP	
				compliance with min # 1104
R. M.	,		Vi this is a sequest for allow	compliance with RULE 1104.
Bracky Winsteron			well, this form must be accompa tests taken on the well in accor	nied by a tabulation of the deviatio
Production Supervisor		All sections of this form mu	at be filled out completely for allow	
		itle)	able on new and recompleted We	114.
7-15-86			Fill out only Sections I. I	I. III, and VI for changes of owner ter, or other such change of condition
	(D	Date)	Separate Forms C-104 mus	t be filed for each pool in multipl
			completed wells.	

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DISTRIBUTION			
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LAND OFFICE			
TRANSPORTER	OIL		
TRANSFORTER	GAS	Ī	
OPERATOR			
			_

## NEW MEXICO OIL CONSERVATION COMMISSION

Form C-104

	SANTA FE		REQUEST F	OR ALLOWABLE	Supersedes Old C-104 and C-110
	FILE			AND	Effective 1-1-65
	U.S.G.S.		AUTHORIZATION TO TRAN	ISPORT OIL AND NATURAL G	AS
	LAND OFFICE				
	TRANSPORTER OIL	$\perp$			
	GAS				
ļ	OPERATOR				
1.	Operator				
	•	ril F	Producing Corporation		
	Address				
	llth	Floc	or, Vaughn Bldg., Midland	, TX 79701	
	Reason(s) for filing (Check proj	per box)		Other (Please explain)	
	New Well		Change in Transporter of:	Gas - effective	2 25 8),
	Recompletion		OII Dry Gas	XXI Gas - effective	, 3-27-04
	Change in Ownership		Casinghead Gas Condens	ore XX   Oil - effective	9-19-84
,	If shows of ownership give s	ame			
	If change of ownership give r and address of previous owner				
11.	DESCRIPTION OF WELL	AND I	Well No. Pool Name, Including Fo.	rmation / Kind of Leas	Lease No.
		7	1	State Federa	lorFee Federal 13641
	Belco Fed	<u>eral</u>	l   Antelope Ridge	Strawn Gas	rederal ; 130.1
	<u> </u>	760	)	1.000 Fant Stam	The east
	Unit Letter;	760	Feet From The SOUTH Line	and 1980 Feet From	
	Line of Section 15	Tow	mship 23S Range 3	4E , NMPM.	Lea County
	Line of Section				
III.	DESIGNATION OF TRAN	SPORT	TER OF OIL AND NATURAL GAS	s	
	Name of Authorized Transporte	r of Oil	or Condensate XX	Address (Give address to which appro	
	Lantern Petroleum		•	P O Box 2281, Midland	TX 79702
	Name of Authorized Transporte	r of Cas	or Dry Gas XX	Address (Give address to which appro	ived copy of this form is to be sent) 79701
	Adobe Oil & Gas C	orpor		1100 Western United L	ife Bldg, Midland, TX
	If well produces oil or liquids,		Unit Sec. Twp. Rge.	15 405 1011011, 1111111	en
	give location of tanks.		; G	Yes	3-7-81
	If this production is comming	gled wit	th that from any other lease or pool,	give commingling order number:	
IV.	COMPLETION DATA		Oil Well Gas Well	New Well Workover Deepen	Plug Back   Same Resty, Diff. Resty.
	Designate Type of Con	mpletio		l l	
			Date Compl. Ready to Prod.	Total Depth	P.B.T.D.
	Date Spudded		Bate Compile recor, is a see	·	
	Elevations (DF, RKB, RT, CR	. etc.i	Name of Producing Formation	Top Oll/Gas Pay	Tubing Depth
		,			
	Perforations				Depth Casing Shoe
			TUBING, CASING, AND	CEMENTING RECORD	
	HOLE SIZE		CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
V.	TEST DATA AND REQU	EST F	OR ALLOWABLE (Test must be a	fter recovery of total volume of load of epth or be for full 24 hours)	land must be equal to or exceed top allow
OIL WELL				Producing Method (Flow, pump, gas	ift, etc.)
	Date First New Oil Run To To	ing 9	Date of Test		•
			Tubing Pressure	Casing Pressure	Choke Size
	Length of Test		1 abing 1 1000mg		
	Annual Book During Test		Oil-Bbls.	Water-Bbls.	Gas-MCF
	Actual Prod. During Test				
	GAS WELL				
	Actual Prod. Test-MCF/D		Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
	Testing Method (pitot, back p	r.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
				<u> </u>	
vi	. CERTIFICATE OF COM	PLIAN	CE	OIL CONSERY	ATION COMMISSION
¥ £	, CLIVIII ICALL OF COM	4.01			1984
I hereby cortify that the rules and regulations of the Oil Conservation			regulations of the Oil Conservation	APPROVED	, 19
	a			11	D BY JURRY SIRTON
	above is true and complete to the best of my knowledge and belief.		DISTINCT I SUPRIMISOR		
				TITLE	
	Dr. Dehadon			This form is to be filed in	compliance with RULE 1104.
			ii	swable for a newly drilled or deepens	
	(Signature)			well, this form must be accomp	residu do a impulation of fue gesteric

Production Clerk (Title)

(Date)

9-17-84

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 allow able 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 multiple completed wells.

7 7 725

SEP 2 5 1984



