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

P.O. Box 2088

DISTRICT III
1000 Rin Brizos Rd., Aziec, NM 87410

Santa Fe, New Mexico 87504-2088

I.							AUTHOR		N				
. TO TRANSPORT OF						Well API No.							
Clayton Williams Energy	. H 1	1							30-025-094	05 🗸			
Address	1						 						
Six Desta Drive, Suite	3000 Mi	dland, I	exas	79705			<u> </u>						
Reason(s) for Filing (Check proper be	ur)		_		$\overline{\mathbf{X}}$	Othe	t (Pleas exp	iam)					
New Well	•	Change in	•	\neg			n Operaco		only.				
Recompletion \square	Oil Coringhau	d Gas	Dry G	_	Effe	ectiv	e .04/07/9	93					
Change in Operator	Clargnes		COBOR	2000		<u> </u>							
nd address of previous operator	Clayton W. I	Williams	Jr.	., Inc.					<u> </u>				
I. DESCRIPTION OF WE	LL AND LEA	ASE											
Lease Name		Well No. Pool Name, Include				Conta			nd of Lease		Lease No.		
State A AC 1		50	Jalm	nat Tans	ill Yat	es 7	Rvrs		ME, ANDREAS				
Location										.			
Unit Letter0	:	660	. Feet F	rom The _	South	_ Line	and	980	Feet From Th	e <u>East</u>	Line		
Section 24 Tow	nahip	235	Range		36E	. NA	ирм,		Lea		County		
30000 21 100		230				1							
II. DESIGNATION OF TR				ND NATU						 			
Name of Austhorized Transporter of O	a 🗆	or Conden	ente.		Addres	s (Giw	i address to w	ihich appro	wed copy of the	s form is to be s	ient)		
Name of Authorized Transporter of C	asinghead Cas		or Dr	Gas XX	Addes	a (Cin	address to -	hich area	wed copy of the	form is in he	tent)		
Xcel Cas Company.			טו טוי	<u> </u>	1		r., Suite			, Texas 79			
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge	_		connected?		hen ?	<u>, , , , , , , , , , , , , , , , , , , </u>			
ive location of tanks.	<u>i </u>		<u>L</u>	<u> </u>				<u>i_</u>					
this production is commingled with	that from any oth	er lease or	pool, gi	ive commun	gling orde	rownb	er						
V. COMPLETION DATA					_,					_,			
Designate Type of Complete	ion - (X)	JOH Well		Gas Well	New	Well	Workover	Doepe	n Plug Bac	k Same Resiv	Diff Res v		
Date Spudded	Date Comp	oi. Ready to	Prod		Total I	epth			P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.)	Name of P	roducing Fo	omatio	0	Top Oi	/Gas F	Pay		Tubing D	epth			
								<u> </u>	Depth Ca	yan Shoe	·		
Perforations									рери Са	nug Sikk			
	T	TUBING, CASING AND					CEMENTING RECORD						
HOLE SIZE	HOLE SIZE CASING & TUBING SIZE					DEPTH SET SACKS CEMENT							
							1						
									· · · · · · · · · · · · · · · · · · ·				
							<u>.</u>	-					
. TEST DATA AND REQU	JEST FOR A	LLOW	ABLE										
OIL WELL (Test must be af	ter recovery of to	eal volume	of load	oil and mu	si be equa	1 10 or	exceed top ail	lowable for	this depth or b	e for full 24 ho	urs)		
Date First New Oil Run To Tank						Producing Method (Flow, pump, gas lift, etc.)							
					<u> </u>				Choke Siz				
Length of Test	Tubing Pre	Tubing Pressure				Casing Pressure							
Actual Prod. During Test	Dunns Test Oil - Bbls.				Water - Bbis.				Gas- MC	Gas- MCF			
Attual Flor Duling Lea	On - Bois.								į				
GAS WELL													
Actual Prod. Test - MCF/D	Length of Test					onden	MMCF		Gravity o	Condensate	· ·····		
esting Method (pitot, back pr.)	Tubing Pre	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)				Choke Size			
VL OPERATOR CERTIF	TCATE OF	COME	T TA	NCE					<u> </u>				
VI. OPERATOR CERTIF I hereby certify that the rules and r				4015			DIL CO	NSER	VATION 2719	LDIVISIO	NC		
Division have been complied with	and that the infor	matica giv	ea abov	re ·				JUI	_ Z 7 19!	33	•		
is true and complete to the best of	my knowledge ar	nd belief.	,			Date	Approve	ed					
01: 1	2000	1)				FF: T						
Kolen D.	rr/Cacl	'ey/			F	Зу		Orig	Signed h	·			
Signature Robin S. McCarley	Pro	duction	Ana1	vst	- 11	- y		Pa	. Signed by ul Kautz				
Printed Name			Title	,	-	Title.		G	eologis t				
04/01/93	(91	5) 682 - 6				1110	·						
Date		Tole	phone	No	- 11								

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.