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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

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

## OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410

REQUEST FOR ALLOWABLE AND AUTHORIZATION

	T	OTRA	<u>NSP</u>	ORT OIL	AND NAT	URAL GA	S Wall A	PI No			
perator Clayton W. Williams, Jr., Inc.						Well API No. 30-025-09407					
						30-023-03407					
d <b>ress</b> Six Desta Drive, Suite 3	8000, Midl	and, Te	xas 7	79705							
ason(s) for Filing (Check proper box)					مبم	(Please expla					
w Well		Change in	Transp		effective	e July 1,	1991				
completion (XX)	Casinghead		Conde	$\overline{}$							
hange in Operator LAA hange of operator give name Hall	1 Do comus				ix Desta	Drive, Sui	te 2700,	Midland, T	exas 7970	5	
address of previous operator Hall	J. Rasmus	ssen ope	raci	ng me,,							
DESCRIPTION OF WELL	AND LEA	SE		Neins, Includin	o Formation (	Cro Gas)	Kind	of Lease	Le	se No.	
ease Name		Well No.		mat Tansil			State,	Jedarak anxies			
State A A/C 1			1 001	inde Tans.			<u>-</u>				
Unit LetterE	: 1980	)	Feet	From The N	orth_ Line	and6	60 Fe	et From The _	West	Line	
Omi Deuer			_	2	er NA	ирм,	l ea			County	
Section 24 Townsh	i <b>p</b> 23S		Rang	<u>ge</u>	6E , Ni	nrivi,					
. DESIGNATION OF TRAI	NSPORTE	R OF O	IL A	NO NATUI	RAL GAS			5 4 in 60	in to be se		
ame of Authorized Transporter of Oil		of Conde	nsate	XXX	HOMEON (CO.)			d copy of this fo	rm ⊔ w ve se	-,	
Texas New Mexico Pipel				er Coe (VV)	Address (Giv	2130, Hous	hich app over	a copy of this fo	orm is to be se	nı)	
	of Authorized Transporter of Casinghead Gas or Dry Gas XX				Address (Give address to which app oved of Six Desta Drive, Suite 5700,			, Midland,	Texas 79	705	
Xcel Gas Company  Twell produces oil or liquids,	Unit	Sec.	Twp	Rge.		y connected?	When				
ve location of tanks.	<u> </u>	L									
this production is commingled with that	t from any ou	her lease or	pool,	give comming	ing order num	ber:					
V. COMPLETION DATA		Oil Wel	<u> </u>	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res v	Diff Res'v	
Designate Type of Completion	1 - (X)	i	i		<u> </u>	l	1	L DRED		J	
Date Spudded	Date Com	ipl. Ready I	to Prod	i	Total Depth			P.B.T.D.			
	Nome of I	Producing F	Format	ion	Top Oil/Gas Pay			Tubing Dep	Tubing Depth		
levations (DF, RKB, RT, GR, etc.)	Name of 1	Name of Producing Formation							Depth Casing Shoe		
erforations	l							Depth Casir	ig Shoe		
				CDIC AND	CEMENT	NG PECO	RD				
		TUBING & 1	i, CA	SING AND	CEMENT	DEPTH SE	T		SACKS CEM	ENT	
HOLE SIZE		ASING &	OBIN	G SIZE							
The state of the s	COT FOR	ALLOW	VARI	LIE.							
V. TEST DATA AND REQUIDIL WELL (Test must be after	r recovery of	total volum	ue of lo	oad oil and mus	it be equal to o	or exceed top a	llowable for t	his depth or be	for full 24 ho	urs.)	
OIL WELL (Test must be after Date First New Oil Run To Tank	Date of T				Producing N	Method (Flow,	pump, gas lifi	t, etc.)			
		Tubing Pressure			Casing Pressure			Choke Size			
Length of Test	Tubing P				Casing 1100			C. MCE			
Actual Prod. During Test	Oil - Bbl	Oil - Bbls.		Water - Bbls.			Gas- MCF				
ACIDAL FIOR DURING THE											
GAS WELL						2.5/5=		Gravity of	Condensate		
Actual Prod. Test - MCF/D	Length o	Length of Test			Bbls. Condensate/MMCF			Gravity of Condensate			
	Tuking	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Siz	e		
Testing Method (pitot, back pr.)	I ming	, treame (a)		•							
VI. OPERATOR CERTIF	ICATE C	)F CON	/PI	IANCE			NICED'	VATION	ואואום	ON	
VI. OPEKATOR CERTIF	gulations of t	he Oil Con	servati	ion						<b>J</b> , <b>T</b>	
I hereby certify that the fuller and it	I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					Date Approved					
Division have been complied with t	and that the in	a and haline			ii Da	te ADDIO'	vea :7777				
I hereby certify that the rules and re Division have been complied with a is true and complete to the best of a	and that the in	e and belief	•								
Division have been complied with a is true and complete to the best of a	and that the in my knowledge	e and Deliei	·•		- 11					N	
Division have been complied with a is true and complete to the best of a	my knowledge	e and better			- 11		t mai sigi	NED 25 117 T 1 1 1 28 V	SEXTO	N	
Division have been complied with a is true and complete to the best of a Complete to the best of	my knowledge	e and Deliei	naly	st	Ву	1935	nal sigi distric	NED 27	SEXTO	N	
Division have been complied with a is true and complete to the best of a	Regul	atory A	naly: Ti		Ву	1935	nal sigi distric	NED 25 LI	SEXTO	N	

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.