Submit 5 Copies Appropriate District Office DISTRICT I P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Revised 1-1-89 See Instruction

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

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

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Lease Name State, Federal or Fee State, Federal or Fee	2
Address P. O. Box 3178, Midland, Texas 79702 Reason(s) for Filing (Check proper box) New Well Change in Transporter of: Recompletion Change in Operator Casinghead Gas Condensate HCW Exploration, Inc., P. O. Box 10585, Midland, Texas 7970 II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Fee State, Federal or Fee	2
P. O. Box 3178, Midland, Texas 79702 Reason(s) for Filing (Check proper box) New Well Change in Transporter of: Recompletion Change in Operator Casinghead Gas Condensate HCW Exploration, Inc., P. O. Box 10585, Midland, Texas 7970 II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Fee State, Federal or Fee	2
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Change in Operator Casinghead Gas Condensate	2
If change of operator give name and address of previous operator HCW Exploration, Inc., P. O. Box 10585, Midland, Texas 7970 II. DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Including Formation Kind of Lease Fee State, Federal or Fee	12
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Lease Name Well No. Pool Name, Including Formation Kind of Lease Fee State, Federal or Fee	
Lease Name Well No. Pool Name, Including Formation Kind of Lease Fee State, Federal or Fee	
State, Federal or Fee	ease No.
R. W. Cowden 1 Jalmat / Y-3R	
Location (950	
Unit Letter J : 1650 Feet From The South Line and 1650 Feet From The East	Line
37F Lea	_
Section 30 Township 23S Range 37E , NMPM,	County
THE PROPERTY OF THE AMERICAN OF OUR AND NATURAL CAS	
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS Name of Authorized Transporter of Oil or Condensate Address (Give address to which approved copy of this form is to be see	ni)
None	
Name of Authorized Transporter of Casinghead Gas Or Dry Gas Address (Give address to which approved copy of this form is to be se	ni)
El Paso Natural Gas Company P. O. Box 1384, Jai, New Mexico 80	3252
If well produces oil or liquids, Unit Sec. Twp. Rge. Is gas actually connected? When?	
give location of tanks. Yes	·
If this production is commingled with that from any other lease or pool, give commingling order number:	
IV. COMPLETION DATA Oil Well Cas Well New Well Workover Deepen Plug Back Same Res'v	Diff Res'v
Designate Type of Completion - (X)	
Date Spudded Date Compl. Ready to Prod. Total Depth P.B.T.D.	
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation Top Oil/Gas Pay Tubing Depth	
Perforations Depth Casing Shoe	
TUBING, CASING AND CEMENTING RECORD	
THRING CANDULAND UDWENTING RECORD	
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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.

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