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

DISTRICT II P.O. Drawer DD, Antesia, 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 TO TRANSPORT OIL AND NATURAL GAS

perator							Well API No.				
FINA OIL & CHEMICAL COMPANY							30 025 12439				
ddress	•										
Box 2990, Midland, TX	<u>7970</u>	<u>2-2990</u>)			e (Planes sen) -	i a)				
leason(s) for Filing (Check proper box)	Other (Please explain)										
lew Well	Oil	Change in	Dry G								
hange in Operator	Casinghea	_	Conde								
change of operator give name											
d address of previous operator		· CE									
I. DESCRIPTION OF WELL A	DESCRIPTION OF WELL AND LEASE Well No. Pool Name, Inch.			Name, Includir	ne Formation		Kind o	Kind of Lease		Lease No.	
Ginsberg Federal	5				ttix Seven Rivērs		State.	State Federal or Fee		NMNM0569	
ocation				<u> </u>	•	een GB					
Unit Letter	. <u>. 660</u>	0	_ Feat F	rom The No	orth Line	and <u>660</u>	Fe	et From The _	West	Line	
. 21	250		D	38E	ND.	ирм,		Lea		County	
Section 31 Township	<u>25S</u>		Range	JOL	, NN	nrm,				County	
II. DESIGNATION OF TRAN	SPORTE	ROFO	IL AN	ND NATU	RAL GAS	· · · · · · · · · · · · · · · · · · ·					
Name of Authorized Transporter of Oil	XX	or Conde	nsate		Address (Giw	e address to wh					
Pride Pipeline Company	hand Can		Or De	y Gas		BOX 2436.					
Name of Authorized Transporter of Casing	picad U28	لـــا	יום זט	, 👊 []	. 1001000 (018					, 	
None If well produces oil or liquids,	Unit Sec.				!s gas actually connected?		When	When ?			
ive location of tanks.	<u> </u>	37_	125	<u> 138</u>	No No						
this production is commingled with that to V. COMPLETION DATA	from any ou	her lease of	r pool, g	nve commingl	ing order num	oer:		<u> ,</u>			
V. COMPLETION DATA		Oil We	11	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion		_i	<u>i</u> _			<u> </u>	1	<u> </u>	L	_l	
Date Spudded	Date Corr	ipl. Ready	to Prod.		Total Depth			P.B.T.D.			
levations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas Pay			Tubing Depth			
											Perforations
						NG PEGOE					
TUBING, CASING AND HOLE SIZE CASING & TUBING SIZE					DEPTH SET			SACKS CEMENT			
HOLE SIZE	C	ASING &	UBING	i SIZE		DEF IN SET			or to to to		
	 										
	om non	11101	VADI	т-							
V. TEST DATA AND REQUE OIL WELL (Test must be after	ST FUK	ALLUY	v A.D.L. ve of loa	E. ad oil and mus	t be equal to o	r exceed top al	lowable for th	is depth or be	for full 24 ho	urs.)	
OIL WELL (Test must be after and Date First New Oil Run To Tank	Date of 7		· · · · · · · · · · · ·		Producing N	fethod (Flow, p	oump, gas lift,	etc.)			
Date I has I to the date of the last of th					· · · · · · · · · · · · · · · · · · ·			Choke Size			
Length of Test	of Test Tubing Pressure				Casing Pressure			GHORE SILE			
D. C. Tree	Oil Bri	Oil Phie				Water - Bbls.			Gas- MCF		
Actual Prod. During Test	Oil - Bbls.										
CARTITIT			<u>-</u>							=	
GAS WELL Actual Prod. Test - MCF/D	Length of Test				Bbls. Conde		Gravity of Condensate				
				/6			Choke Size				
esting Method (pitot, back pr.) Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			CHOICE SILC				
	1	VE CO.	m r	ANICE	-\						
VI. OPERATOR CERTIFIC	CATE C	OF CON	APLL	ANCE		OIL CO	NSER\	/ATION	DIVISI	ON	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above					neg 1						
is true and complete to the best of my	y knowledge	e and belief	f.		Dat	te Approv	'ed				
A - 11/	A							المحدد .	b♥		
Spenature					Ву	By Orig. Signed by,					
Neva Herndon, Petr	otechn	ical_A	عنعد	tant			4	Geolog B	ŀ		
Printed Name December 9, 1992	91	5 688	Tit 060-3		Titl	e	 				
Date			Telepho								

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
- 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.