Liamit 5 Cones DOTOTO LISTING Office

3.O. Box 1980. Hoods, NM 38240

P.O. Drawer U.D. Ariesta, NM 88210

Jate of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

61432

Form C-104
Revised 1-1-89
See instructions
at Bottom of Page

DISTRICT TI	Santa Fe. New	. Box 2088 Mexico - 87504-2088	011
300 Rio Brazos Kd., Affec, NM 874	10		
Ī.	REQUEST FOR ALLOW	// BLE AND AUTHORIZ C <u>IL A</u> ND NATURAL GA	ZATION
Detailor		CIL AND NATURAL GA	Hell Ari No
IRIDIAN JI	MC.		30-025- 2452100
7. 3. 30X 5181	0 '/TDI WD 377 = 3770 :		
Reason(s) for rising it neck proper out	0, 11DLAND, 11 - 7710-1	o 10	
New Well =	Change in Transporter of:	· -	
Recompletion Change in Operator	Oil Dry Gas	I Gas Co. to Sid	Gatherer from El Paso Natural Richardson Carbon $\hat{\alpha}$ Gasoline
If change of operator give name	Caringhead Gas Condensate	- Company.	
and address or previous operator			
IL DESCRIPTION OF WELL			
Rhodes Storage		iuding Formation	Kind of Lease Lease No.
Location	on to Arknodes	Yates 7-Rivers	State Federal Of Fee (030/8/
Unit Letter	: / 9 8 10 Feet From The		PRO Feet From The
Section 🖁 Towns	26-5 37	- F	Lea
V TOWN	Kange	NMPM.	County
III. DESIGNATION OF TRA	NSPORTER OF OIL AND NAT	TURAL GAS	
Name of Authorized Transporter of Oil	or Condensate	Address (Give agaress to whi	ch approved copy of this form is to be sent!
Name or Authorized Transporter of Cas	inghead Gas or Dry Gas	f Address of	
Sid Richardson Carbon	1 & Gasoline Co.	201 Main Street	ch approved copy of this form is to be sent!
If well produces out or liquids, gave location of tanks.	Unity Sec. Twp. R	ge. 1 is gas actually connected?	Ft. Worth, TX 76102
If this production is communated with the	8 74 3	1 10 3	N/A
IV. COMPLETION DATA	SID RICHARDSON GASO	nging order number: LINE CO - Eff 3/1/9	3
Designate Type of Completion		New Well Workover	Decree Di Di L
Date Spudded	Date Compt. Ready to Prod.		Deepen Plug Back (Same Res'v Diff Res'v
	Date Compt. 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			. wang Depui
			Depth Casing Shoe
	TUBING, CASING AN	D CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
V TECT DATE AND THE			
V. TEST DATA AND REQUE OIL WELL Test must be given.	ST FOR ALLOWABLE		
Date First New Oil Run To Tank	Date of Test	st be equal to or exceed top allow Producing Method (Flow, pum	able for this depth or be for full 24 hours.
	İ	!	o. gas iyi, eic.)
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbis	Water - Bbls.	
	- 01 - Doie.	MATEL - ROIT	Gas- MCF
GAS WELL			
Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
esting Method (puot, back pr.)			
medica (publ., buck pr.,)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size
VL OPERATOR CERTIFIC	ATE OF COMPLIANCE		
L OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation		OIL CONSERVATION DIVISION	
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.			·
		Date Approved	FEB 07'92
Cours & Ad			
Signature		By ORIGINAL SIGNED BY JERRY SEXTON	
Connie L. Malik, Regulatory Compliance Rep. Printed Name Title		DISTRICT I SUPERVISOR	
1/22/92 9	15-688-6891	Title	
Date	Telephone No.	FOR RECORD	D ONLY APR 301993

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.