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

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, Antesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION

•		TO TRA	NSPO	RT OIL	AND NA	TURAL G		INC.			
perator			i	API No.	5.0						
D-Mil Production, Inc.							025–262	:5-26250			
Address	m s ·	76006									
PO Box 49 Argyle	TX	76226			Oth	r (Please expl	lain)				
Reason(s) for Filing (Check proper box) New Well		Change in	Transmort	er of:		i i i i i i i i i i i i i i i i i i i	···/				
Recompletion	Oil		Dry Gas	~.							
Change in Operator		ad Gas	Condens	ate							
change of operator give name										·	
ad address of previous operator											
I. DESCRIPTION OF WELL.	AND LE	ASE									
ease Name Well No. Po			Pool Nar	ne, Includi	ng Formation				f Lease Lease No. Federal oxiXeX NM 19644		
Wilson "8" FEdera	1 4 Sioux Tan			sill Yates Rivers			reoctal orac	NM-18644			
Location											
Unit LetterA	_ :66		Feet From	m The	North Lin	and6	60 F	eet From The	East -	Lir	
										County	
Section 8 Township	p26	S	Range	36E	, N	MPM,	Lea			County	
TO STORES OF THE AN	cnangi	en or o	TF A BIT	NIA TOTAL	DAT CAS						
II. DESIGNATION OF TRAN				NATU	Address (Giv	e address to w	hich approved	d copy of this	form is to be s	ens)	
Name of Authorized Transporter of Oil					Address (Give address to which approved copy of this form is to be sent) 333 Clay PO Box 4648 Houston TX 77210-4648						
Scurlock Permian Corp Name, of Authorized Transporter of Casing	oratio	m	or Dry C	ias 🗍	Address (Giv	e address to w	hich approve	d copy of this j	form is to be s	ent)	
Lil Richardson	anh	~ + Ha									
If well produces oil or liquids,	Unit	Sec.	Twp.	Rge.	Is gas actuall	y connected?	When	n ?			
ive location of tanks.	<u> </u>		L 26E		Yes			2/22/80			
f this production is commingled with that	from any o	ther lease or	pool, give	commingl	ing order num	ber:					
V. COMPLETION DATA									10 10	hyeen a	
Designation of Completion	(V)	Oil Wel	ı G	as Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res's	
Designate Type of Completion		npl. Ready to	a Brad		Total Depth	l	J	P.B.T.D.	_l		
Date Spudded	Date Con	npi. Keany i	o riou.		roun Depui			1.5.1.5.			
Elevations (DF, RKB, RT, GR, etc.)	Name of	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth		
Lievadolia (D1 , Millo, M1, Oli) dioly		value of Fredering Fernandin									
Perforations					_!			Depth Casi	ng Shoe		
		TUBING	, CASIN	IG AND	CEMENTI				04040.051		
HOLE SIZE	CASING & TUBING SIZE				DEPTH SET				SACKS CEM	MENI	
	ļ										
	<u> </u>				 						
	-				-						
V. TEST DATA AND REQUE	ST FOR	ALLOW	ABLE					_,			
OIL WELL (Test must be after t	recovery of	total volume	of load o	il and musi	be equal to o	exceed top a	llowable for 11	is depth or be	for full 24 ho	ws.)	
Date First New Oil Run To Tank	Date of 7				Producing M	ethod (Flow,	pump, gas lift,	eic.)			
								Chales Size			
Length of Test	Tubing Pressure				Casing Pressure			Choke Size			
	Oil - Bbls.				Water - Bbis.			Gas- MCF			
Actual Prod. During Test											
					J						
GAS WELL	17	f Tort			Bble Cond-	ncate/MAACE		Gravity of	Condensate		
Actual Prod. Test - MCF/D	Length of Test				Bbls. Condensate/MMCF			Charly of Collections			
Tacting Method (nitot back pr.)	ing Method (pitot, back pr.) Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size				
resumg returned (prior, odek pr.)	Tooms (Since M)										
VI ODED ATOD CERTIFIC	LATE	ECOM	DITAN	CE							
VI. OPERATOR CERTIFIC I hereby certify that the rules and regu				CE		OIL CO	NSERV	/ATION	DIVISION	NC	
Division have been complied with and								4113	רםי פ ח		
is true and complete to the best of my					Date	e Approv	ed	JUL	0 8 '92		
1	<u> </u>	-			Dall	Applov		mad hv	-		
					By_		Orig. Sig	lauu			
Signature		Dage of	ont f	Co 5 '	11		Geold	gist			
W. Dale Miller Printed Name		Presido	Ent & Title	secret	11 -		•	_			
		(817)4	64-342	26							
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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.