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

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

Energ Minerals and Natural Resources Department

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

OIL CONSERVATION DIVISION

TO TRANSPORT OIL AND NATURAL GAS

P.O. Box 2088

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

Santa Fe, New Mexico 87504-2088 REQUEST FOR ALLOWABLE AND AUTHORIZATION

Operator Doyle Hartman	Well API No.													
Address P. O. Box 10426, Mic	dland	Toyng	70	702							<u> </u>		_	
Reason(s) for Filing (Check proper box)	uranu,	Texas		702	·		APT (Please expl	ain)						
New Well		Change in	Tene		dan afi	Other (Please explain)								
Recompletion	Oil	Change II	1					•						
		🗀	Dry			Pomozio 7	TATIMED OF O	andana	a + a + - a .					
Change in Operator	Casinghea	d Gas	Con	iden	sale [14]	Remove	TNMP as c		are tra	ansp	orter	W. 17-	_	
and address of previous operator												 .		
II. DESCRIPTION OF WELL	AND LEA													
Lease Name R. W. Cowden C	Well No. Pool Name, Includ				ling Formation -Y-7R) Pro Gas			Kind of Lease XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX			Lease No.			
Location	l		1 36			1 /K/ 11	.U Gas	AA	MARYENAN	A rec				
Unit Letter H	, 16	50	Fieel	t Em	m The N	orth	e and80	0	Feet From	т.	East			
	- •		. 1 00		an the	ып	e and		reet From	1 ne		Line		
Section 31 Township	23S		Ran	ige	37E	, N	МРМ,	Lea				County		
III. DESIGNATION OF TRAN	SPORTE	R OF O	YY A	NIY.	NATT	DAT CAC								
Name of Authorized Transporter of Oil	or Conder		7141	MATU	Address (Giv	ed copy of i	his for	m is to he se	nt)					
				l				••				,		
Name of Authorized Transporter of Casinghead Gas						11								
Warren Petroleum Con							, Oklal	Oklahoma 74102						
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp. Rge.			ls gas actuall	еп ?							
If this production is commingled with that f	rom any oth	er lease or	nool.	give	comminel	ing order num	her:		· · · · · · · · · · · · · · · · · · ·				_	
IV. COMPLETION DATA			,,	.		ang older mail		·					_	
Designate Type of Completion -	· (X)	Oil Well		G	as Well	New Well	Workover	Deepen	Plug B	ack S	ame Res'v	Diff Res'v		
Date Spudded	Date Comp	ol. Ready to	Proc	i.		Total Depth	l	<u></u>	P.B.T.I	L).		<u> </u>	-	
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation						Top Oil/Gas								
The state of the s						•	lubing	Tubing Depth						
Perforations						Depth Casing Shoe							\dashv	
		TIDDIG	<u></u>	<u> </u>								·	_	
11015.0175						CEMENTI	NG RECOR	D						
HOLE SIZE	SING & TU	JBIN	G S	IZE	DEPTH SET			SACKS CEMENT						
								···		·			\dashv	
U TECT DATE AND DECLINE	m non .												ㅣ	
V. TEST DATA AND REQUES OIL WELL (Test must be after re													_	
OIL WELL (Test must be after re Date First New Oil Run To Tank	Date of Tes		oj 100	aa oi	i ana musi					be for	full 24 hour	<i>s.)</i>	_	
		Producing Method (Flow, pump, gas lift, etc.)												
Length of Test	Tubing Pressure					Casing Pressa	Choke S	Choke Size						
Actual Prod. During Test	Test Oil - Bbls.						Water - Bbls.				Gas- MCF			
	L													
GAS WELL														
Actual Prod. Test - MCF/D	D Length of Test						Bbis. Condensate/MMCF				Gravity of Condensate			
Tubing Pressure (Shut-in)						Casing Press.	Choka	Choke Size						
						Gloke Size								
VI. OPERATOR CERTIFICA					CE		NI 00N	050		–			_	
I hereby certify that the rules and regular	tions of the (Oil Conser	vation	1		(DIL CON	SERV	AHO	ND	IVISIO	N		
Division have been complied with and the	nat the inform	mation give	n abo	ove										
is true and complete to the pest of may or	nowledge and	d belief.				Date	Approved	d t			-	,		
\mathcal{N}													_	
Signature						By 1997 AND STREET BOTH STREET TOWNS								
Michael Stewart		Engi						espa e de			*,			
Printed Name 9-20-90	a	15/684	Title			Title.								
Date			phone										_	

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.