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

State of New Mexico nergy, Minerals and Natural Resources Depart

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

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

Santa Fe, New Mexico 87504-2088

I.	REQ				BLE AND L AND NA			!			
Operator Operator							Well API No.				
Santa Fe Exploration Address	30-025-11157										
P. O. Box 1136, Roswe		Mexico	882	202-11							
Reason(s) for Filing (Check proper box) New Well		Change i	a Transpo	rter of:	Out	ner (Please expl	lain)				
Recompletion	Oil		Dry Ga	_	Effec	tive 11-	1-91				
Change in Operator If change of operator give name	Casinghe	ead Gas 🖸	Conden	sate 🗌							
and address of previous operator							· · · · · · · · · · · · · · · · · · ·		····		
II. DESCRIPTION OF WELI	L AND LE	EASE									
Lease Name Langlie-Jack Unit		Well No.	Pool Na	Pool Name, Including Formation Langlie Mattix 7 Rvrs Q			Kind	l of Lease , Federal öFF4	Lease No. 8910089100		
Location		10	Junie	,110 116	accix / i	AVIS QUE			6910	703100	
Unit LetterG	:	80	_ Feet Fro	om The	North Lin	e and19	9801	Feet From The	East	Line	
Section 20 Towns	hip 24S		Range	37E	, N	мрм,	Lea			County	
III. DESIGNATION OF TRA	NSPORTI	ER OF O	IL ANI	NATTI	IRAI. GAS				_		
Name of Authorized Transporter of Oil	Ø	or Conde			Address (Giv	e address to w	hich approve	d copy of this f	orm is to be s	ent)	
Manual Reporter of Casi	nghead Gar	XX	or Dry (Gee 🗀	Address (C)			4			
Sid Richardson Carbon & Gasoline Co.					lst City	, Bank To	wer, 2	od copy of this form is to be sent) Ol Main, Ft. Worth, TX			
If well produces oil or liquids, give location of tanks.	Unit G	Sec. 20	Twp. 24S	Rge. 37E	Is gas actuall YES	y connected?	Whe	B ?		76	
f this production is commingled with tha V. COMPLETION DATA		1	<u> </u>	.I	1				Jnknown		
Designate Type of Completion	. ~	Oil Well	G	as Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded		ipl. Ready to	Prod		Total Depth	<u> </u>	<u></u>	1	<u> </u>		
					,			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
Perforations			 		<u> </u>			Depth Casin	g Shoe		
		TIBING	CASIN	G AND	CEMENTO	IC PECOP	<u> </u>				
HOLE SIZE		TUBING, CASING AND CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT			
											
/ moom b / ma / hm mooting											
V. TEST DATA AND REQUE OIL WELL (Test must be after				l and must	he equal to on	erceed top allo	umble den ch	in damth an ha t	on 6.11 74 have	1	
Date First New Oil Run To Tank	Date of Te		y naa o	i una masi		thod (Flow, pu			or juil 24 Nou	·s.,	
ength of Test	Tubing Pro	Tubing Pressure				Casing Pressure			Choke Size		
Actual Prod. During Test	Oil - Bbls.	Oil - Bbls.				Water - Bbis.			Gas- MCF		
GAS WELL		.						<u> </u>			
Actual Prod. Test - MCF/D	Length of	Test			Bbls. Condens	nte/MMCF		Gravity of C	ondensate	 1	
esting Method (pitot, back pr.)	Tubing Pro	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size		
I hereby certify that the rules and regu Division have been complied with and is true and complete to the best of my	lations of the that the info knowledge as	Oil Conserve	vation	CE		OIL CON		,	DIVISIC		
Signate Janet A. Royal Production Analyst					By Gold Signed by Paul Kauta						
Printed Name			Title		 Title_	PLEO:	ogist				
10/30/91 Date	(50)5) 623	-2733		11110		· · · · · · · · · · · · · · · · · · ·			8.41	

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.