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

## State of New Mexico ...nergy, 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 II
P.O. Drawer DD, Antesia, NM 88210

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.	-	TO TRA	ANSP	ORT O	L AND NA	TURAL G	AS				
Operator								API No.			
Santa Fe Exploration (	30-025-11167										
P. O. Box 1136, Roswell	1. New	Mexic	0 8	8202-11	36	-					
Reason(s) for Filing (Check proper box)		TICKIC		5202 11		ner /Blassa sw	dei-1	<del></del>			
New Well	Other (Please explain) Change in Transporter of:										
Recompletion	Oil Dry Gas Effective 11-1-91										
Change in Operator	Casinghead										
If change of operator give name and address of previous operator										<del></del>	
•	4370 5 70			· · · · · · · · · · · · · · · · · · ·		<del></del>	······································	<del></del>	<del></del>		
II. DESCRIPTION OF WELL Lease Name	AND LEA		T=								
Langlie-Jack Unit	Well No.   Pool Name, Included 13   Langlie Ma						of Lease Federal o <del>g Foe</del>				
Location			June	5110 110	CCIX / K	vis Quee	all Mark	Teorisi ok kon	89100	1189100	
Unit LetterJ	:198	0	Feet F	rom The	South Lin	e and	30 F	eet From The	East	Line	
Section 20 Townshi	p 24S		Range	37E	, N	мрм,	Lea			County	
III. DESIGNATION OF TRAN	CDADTE:										
III. DESIGNATION OF TRAN Name of Authorized Transporter of Oil	SPORTE	or Conden	IL AN	D NATU	RAL GAS						
Marrajo Rel	Address (Give address to which approved copy of this form is to be sent)										
Name of Authorized Transporter of Casinghead Gas XX or Dry Gas					Address (Give address to which approved copy of this form is to be sent)						
Sid Richardson Carbon & Gasoline Co.				lst City	Bank To	ower, 20	l Main.	l Main, Ft. Worth, TX			
well produces oil or liquids, Unit Sec. ve location of tanks.			745 24S	Rge.	Is gas actually connected? W			en? 76102			
		_	ľ		_		L	Unknow	1		
If this production is commingled with that IV. COMPLETION DATA	rom any othe	r lease or	pool, giv	ve comming	ling order numl	ber:					
Designate Type of Completion	- (X)	Oil Well		Gas Well	New Well	Workover	Doepen	Plug Back S	ame Res'v	Diff Res'v	
Date Spudded Date Compi. Ready to Pr			Prod.		Total Depth	<u>!</u>	<u>J</u>	P.B.T.D.	<del></del>		
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas I	Day					
Perforations					i sponou			Tubing Depth			
Terroradous								Depth Casing	shoe	<del></del>	
TUBING, CASING AND					CEMENTIN	VG RECOR	D	<u> </u>	<del></del>	<del></del>	
HOLE SIZE	CASING & TUBING SIZE					DEPTH SET		SACKS CEMENT			
			<del></del>								
V. TEST DATA AND REQUES	T FOR A	LLOWA	BLE				<del></del>	l <u></u>			
OIL WELL (Test must be after re	covery of tota	il volume d	of load o	oil and must	be equal to or	exceed top allo	wable for this	depth or he for	full 24 hou	re ì	
Date First New Oil Run To Tank	t be equal to or exceed top allowable for this depth or be for full 24 hours.)  Producing Method (Flow, pump, gas lift, etc.)										
Length of Test											
rengui or 1eg	Tubing Pressure			Casing Pressu	re		Choke Size				
Actual Prod. During Test	Oil - Bbis.			Water - Bbls.			Gas- MCF				
GAS WELL											
Actual Prod. Test - MCF/D	Length of Ta				Dil O	A 0. / A					
Actual Prod. Test - MCF/D Length of Test					Bbls. Condens	ate/MMCF		Gravity of Condensate			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
VI. OPERATOR CERTIFICA	TE OF	COV (LD)	TANT	CE				<u> </u>			
VI. OPERATOR CERTIFICATE OF COMPLIANCE  1 hereby certify that the rules and regulations of the Oil Conservation						IL CON	SERVA	ATION DI	VISIO	N	
Division have been complied with and that the information given shove									1.0,0	,ਖ਼ਰ ।	
is true and complete to the best of my knowledge and belief.					Date	Annrover	4				
Linex (1) Fr. 100					Date Approvedby						
Signature					By	P	all Kaut	<b>4</b>			
Sanet A. Royal Production Analyst					Geologist						
Printed Name Title					Title						
10-30-91 Date	(505) 62	23-273			''''-		<del></del>				
		ı etebi	home No	۰	I						

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.