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

OIL CONSERVATION DIVISION

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

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

P.O. Box 2088 Santa Fe, New Mexico 87504-2088

State of New Mexico

mergy, Minerals and Natural Resources Departma.

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

REQUEST FOR ALLOWABLE AND AUTHORIZATION

1.		OTRA	NSP	ORT OI	L AND NA	ATURAL G.	AS					
Operator Citation Oil & Gas	Corp.						Well	API No. 30-025-	11216			
Address 8223 Willow Place S	······································	e 250	Hai	ıston.	Texas	77070-562	·3					
Reason(s) for Filing (Check proper box)	04011 00			15 0011		ther (Please expl						
New Well		Change in	Transp	orter of:	- ا	(,	,					
Recompletion	Oil Casingheac	Gas X	Dry G Conde		Effec	tive Nove	mber 1,	1991				
If change of operator give name and address of previous operator										<u></u>		
II. DESCRIPTION OF WELL	ANDIEA	CE.				· ··· · · · · · · · · · · · · · · · ·						
Lease Name	AND LEA	Well No.	Pool N	Name Includ	ing Formation		Vind	of Lease		N-		
Langlie Mattix Unit	=				of Lease Lease No. FXdexXXX Fee							
Unit Letter D	_ :66	0	Feet F	rom The N	orth Li	ne and 660) · F	eet From The	We	St_Line		
Section 23 Townshi	p 24:	S	Range	3	7E , 1	ЧМРМ,			Lea	County		
III. DESIGNATION OF TRAN	SPORTE	OF O	IL AN	D NATU	RAL GAS	;						
Name of Authorized Transporter of Oil		or Conden			Address (G	ive address 10 wi			form is to be s	eni)		
Shell Pipeline Corporation Name of Authorized Transporter of Casinghead Gas X or Dry Gas						P.O. Box 1910 Midland, Texas 79702						
Name of Authorized Transporter of Casinghead Gas X or Dry Gas Sid Richardson Carbon & Gasoline Co.						Address (Give address to which approved copy of this form is to be sent) First City Tower, 201 Main St. Fort Worth, Texas 761						
Warnell and the Control of the Contr						lly connected?						
give location of tanks. No change	<u>i i</u>				Y	es	Wher	N/A				
If this production is commingled with that it. IV. COMPLETION DATA	rom any othe				ing order nur							
Designate Type of Completion	- (X)	Oil Well	(Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v		
Date Spudded Date Compi. Ready to Prod.					Total Depth			P.B.T.D.				
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top OiVGas Pay			Tubing Depth				
Perforations								Depth Casing Shoe				
HOLE SIZE	TUBING, CASING AND (CEMENT				· · · · · · · · · · · · · · · · · · ·			
NOLE SIZE	CASING & TUBING SIZE				DEPTH SET				SACKS CEMENT			
								 -				
. TEST DATA AND REQUES	T FOR AL	LOWA	BLE									
OIL WELL (Test must be after re	covery of sola	l volume o	of load o	oil and must	be equal to o	r exceed top allo	wable for thi	s depth or be j	for full 24 hou	rs.)		
	Date of Test					leth∞d (Flow, pu						
ength of Test	Tubing Press	ubing Pressure			Casing Pressure			Choke Size				
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gas- MCF				
GAS WELL	-				· · · · · · · · · · · · · · · · · · ·			<u> </u>				
Actual Prod. Test - MCF/D	ength of Test				Bbls. Condensate/MMCF			Gravity of Condensate				
esting Method (pitot, back pr.)	Tubing Press	ubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size			
T. OPERATOR CERTIFICA	TE OF C	OMPI	TAN	CE]				
I hereby certify that the rules and regulate	ions of the Oi	l Conserva	ation			DIL CON	SERV	I NOITA	DIVISIO	N		
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.				Marian Angle								
A Luc and complete to the best of my kn	owiedge and	penel.	$\overline{}$		Date	Approved	t					
Sharon & Ward					MONTH PROPERTY OF THE PROPERTY							
Signature Sharon E. Ward Prod. Regulatory Supv					By							
November 1, 1991	(713)		Гіце 664		Title					<u></u>		
4-916		احماما	none Nie	, I	1							

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.