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

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

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

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

P.O. Box 2088

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, New Mexico 87504-2088

I.							AUTHOR TURAL G		1			
Operator		10 110		<u> </u>	<u> </u>	,,,,,			I API No.			
Will McCasland, Inc												
Address		_	_	_	_	_ ==			0.43			
c/o Oil Reports & C	as Serv	ices,	Inc.	, P.	0.	Box 75	er (Please exp	, NM 88	241			
Reason(s) for Filing (Check proper box) New Well		Change in	Transo	orter of:			ec (1 sewe exp					
Recompletion	Oil		Dry G		хx	E	ffective	5/1/90	1			
Change in Operator	Casinghea	d Gas 🔲	Conde	nsate [<u></u>		
If change of operator give name and address of previous operator								····	<u> </u>			
II. DESCRIPTION OF WELL	AND LEA						<u> </u>					
Lease Name	Well No. Pool Name, Include					ing Formation K			d of Lease ny Rederat you'Fe	of Lease Lease No. Rederal payFee		
Litie Woolworth		4		Jalma	<u>at</u>	_ 		76363				
Location Unit LetterL	_ :16	50	. Feet F	rom The	S	outh Lin	e and990		Feet From The	West	Line	
Section 28 Townsh	ip 24S		Range	; ;	3 7 E	, N	МРМ,		Lea		County	
III. DESIGNATION OF TRAN	SPORTE	R OF O	IL AN	ND NA	TUI	RAL GAS						
Name of Authorized Transporter of Oil		or Conden				Address (Gir	e address to w	hich approv	ed copy of this f	form is to be s	eni)	
Name of Authorized Transporter of Casin	ghead Gas		or Dry	Gas X	x]	Address (Gi	ve address to w	hich approv	ed copy of this f	form is to be s	ent)	
Sid Richardson Carbon & Gasoline			•			201 Main St. 1st Ci			ty Bank Tower, Ft. Worth,			
If well produces oil or liquids,	Unit	Sec.	Twp.	I	Rge.	Is gas actual	y connected?	Wh			76102	
give location of tanks.	1 1		L				Yes		7/25/	<u>80</u>		
If this production is commingled with that IV. COMPLETION DATA	from any oth								1	1	born i	
Designate Type of Completion	- (X)	Oil Well		Gas Wel	u 	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded	Date Comp	l. Ready to	Prod.			Total Depth			P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation						Top Oil/Gas	Pay		Tubing Dep	Tubing Depth		
Perforations									Depth Casir	Depth Casing Shoe		
					ND (CEMENTING RECORD DEPTH SET				SACKS CEMENT		
HOLE SIZE	CASING & TUBING SIZE					DEPTH SET				Grotto GEMENT		
V. TEST DATA AND REQUE	ST FOR A	LLOW	ABLE	;				11.6-4	lite damah an ba	for full 24 hou	\	
OIL WELL (Test must be after t			of load	oil and r	nusi i	be equal to or	ethod (Flow, p	umn eas lift	nis aepin or be	or just 24 hou	v3.)	
Date First New Oil Run To Tank	Date of Tes	ı				Fromeing ivi	culou (1 low, p	Z.47, 8-22 -31				
Length of Test	Tubing Pressure				Casing Press	ıre		Choke Size	Choke Size			
Actual Prod. During Test	Oil - Bbls.				Water - Bbls.			Gas- MCF	Gas- MCF			
GAS WELL				<u></u>	l							
Actual Prod. Test - MCF/D	Length of Test				Bbls. Conder	sate/MMCF		Gravity of C	Gravity of Condensate			
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size	Choke Size			
VI. OPERATOR CERTIFIC	ATE OF	COMP	LIA	NCE)II	JOED!	/ATION	חואופוכ		
I hereby certify that the rules and regul Division have been complied with and				e				NOEH /	AHON	אפואוטול	JIN	
is true and complete to the best of my						Date	Approve	ed	,·	المناب أ	a	
Waren & Della						Date Approved						
Signature	use)				-	By_		<u> </u>	***	TRY COXT	ONNO	
Donna Holler		A	gent. Title							4 3/4 k		
Printed Name 7/17/90		505-		2727		Title						
7/17/90 Date			phone l		-							

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.