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

State of New Mexico rinergy, 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						AUTHORIZ			\mathcal{U}^{s}	8-1192	
TO TRANSPORT OIL AND NATURAL perator							Well API No. 30-025-11269 /				
McDONNOLD OPERA	TING. I	NC.						30-02	5-1126	09/	
Address											
505 N. Big Spri	ng, Suj	te 204	. Mic	lland,		01–4347 er (Please expla	nin)				
Reason(s) for Filing (Check proper box) New Well		Change in	Transpor	rter of:		ci (i ieuse expir	••••				
Recompletion	Oil		Dry Gas								
Change in Operator	Casinghea	d Gas 🗌	Conden	sate							
			Inc.,	<u>c/o (</u>	Dil Repo	rts & Gas	s Servic	es. Inc	bs, NM	755 88241	
II. DESCRIPTION OF WELL Lease Name	Well No. Pool Name, Including Formation							of Lease No.			
Litie Woolworth		#3	<u>J</u> a	almat '	r-y-sr		1 212.00				
Location Unit LetterM	: 990 Feet From The South					e and 990	d 990 Feet From The W			Line	
Section 28 Townshi	p 24S		Range	37E	, N	мрм,		L	ea	County	
III. DESIGNATION OF TRAN	SPORTE	R OF O	L AN	D NATU	RAL GAS						
Name of Authorized Transporter of Oil		or Conden			Address (Giv	e address to wh	hich approved	copy of this f	orm is to be se	nt)	
	e of Authorized Transporter of Casinghead Gas or Dry Gas XX				,	e address to wh					
Sid Richardson Carbon If well produces oil or liquids,	Unit Unit		O. Twp.	Rge.			ower, 20		ot. Ft	. Worth.	
give location of tanks.					Yes	-		194	7		
If this production is commingled with that IV. COMPLETION DATA	from any oth	ner lease or	pool, giv	e commingi	ling order num	ber:					
Designate Type of Completion	- (3)	Oil Well	C	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Date Spudded		pl. Ready to	Prod.		Total Depth	L	<u> </u>	P.B.T.D.	l	_l	
Dati Spaniu		p,	• • • • • • • • • • • • • • • • • • • •		•						
Elevations (DF, RKB, RT, GR, etc.) Name of Producing Formation					Top Oil/Gas	Pay		Tubing Dep	th		
Perforations								Depth Casin	ng Shoe		
I CHO autous								'			
	7	TUBING,	CASIN	NG AND	CEMENTI	NG RECOR	D				
HOLE SIZE	HOLE SIZE CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT			
	 							ļ			
V. TEST DATA AND REQUE	ST FOR A	ALLOWA	ABLE	.,			awahla 6a- 4bi	a dansk na k-	for full 24 base	er)	
OIL WELL (Test must be after to Date First New Oil Run To Tank	Date of Te		of load o	oil and must		ethod (Flow, pi			jor juli 24 nou	rs.)	
Date Liter New Oil You to Jame	Date of Te	; SA.			71002012511						
Length of Test	Tubing Pressure				Casing Pressure			Choke Size			
									Gas- MCF		
Actual Prod. During Test	Oil - Bbls.				Water - Bbls	•		Cas- MCI			
	1				.1			- l			
GAS WELL Actual Prod. Test - MCF/D	Length of	Test			Bhis Conde	nsate/MMCF		Gravity of	Condensate		
Actual Prod. 1881 - MCF/D	Lengus Or	1 Car			Doia. Collect						
Testing Method (pitot, back pr.)	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)			Choke Size		la de la desentación de desentación de la desentación de la desentación de la desentación de la desentación de	
VI. OPERATOR CERTIFIC	ATE OF	COMP	LIAN	ICE	1				D. 40:5		
I hereby certify that the rules and regul	lations of the	Oil Conser	vation			OIL CON	NSERV.		_	אכ	
Division have been complied with and	that the info	rmation giv	en above	:				AUG	18'92		
is true and complete to the best of my	MIOWINGE S	mo ochel.			Date	Approve	ed				
Ciain M. McDan	كسلا					OBIOINE	I CIGAIRA	DA IEDDA	CEYTAN		
Signature		D			∥ By_		L SIGNED				
Craig M. McDonnold		Presid	Title								
Printed Name June 26, 1992	Ç	915-682		6	Title						

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

Date

- 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.

Telephone No.

- 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.