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Subrut 5 Copies Appropriate District Office DISTRICT J	State of New Mexico inerals and Natural Resources Department			nt	Form C-104 Revised 1-1-89 See Instructions					
P.O. Box 1980, Hobbs, NM 88240 DISTRICT II	OIL CONSERVA								m of Page	
P.O. Drawer DD, Artesia, NM 88210 DISTRICT III		Santa I	Fe, New M		04-2088					
1000 Rio Brazos Rd., Aziec, NM 87410					AUTHORIZ					
I. Operator	101	MANO					PI No.			
Tahoe Energy, Inc.		·				30	-025-11	372		
Address 3909 W. Industrial, 1	Midland Te	vac	79703							
Keasou(s) for Filing (Check proper box)	iluland, ic				ver (Please expla	in)		·····		
New Well	Change in Transporter of: Effective November 1, 1991   Oil Dry Gas Image: Condensate   Casinghead Gas Condensate Image: Condensate									
If change of operator give name and address of previous operator				. <u> </u>						
<b>II. DESCRIPTION OF WELL</b>	AND LEASE									
Lease Name	Well No. Pool Name, Includi			State 1			of Lease No. Redectation Note: B-1732			
Ramsey State	1		anglie r	Mattix /	-R QN-GB					
Unit LetterE	. 660	Fea	From The	vest Lin	e and <u>1980</u>	Fo	et From The	North	Line	
Section 36 Township	p 24 <u>8</u>	Rang	<b>e</b> 37E	, N	мрм,	Lea			County	
III. DESIGNATION OF TRAN			ND NATU						<u> </u>	
Name of Authorized Transporter of Oul or Condensate Address (Give address to which approved copy of this form is to be sent)									· <b>v</b> )	
Phillips Petroleum - Trucks 4001 Pembrook, Odessa, TX 79762   Name of Authonized Transporter of Casinghead Gas Image: Construction of Casinghead Gas   Name of Authonized Transporter of Casinghead Gas Image: Construction of Casinghead Gas								น)		
	son Carbon & Gasoline Co. 201 Main Street, Fort Worth, TX 76102									
If well produces oil or liquids, give location of tanks.	Unit Sec.	Twp. 	.   Kgc. 	is gas actual	ly connected? Yes	When	7 4−1−5	5		
If this production is commingled with that I	from any other lease	or pool,	give comming	ing order num						
IV. COMPLETION DATA	   Oil V	Vell	Gas Well	New Well	Warkover	Deepen	Plug Back	Same Res'v	Diff Res'v	
Designate Type of Completion		Ĺ		Total Depth	İ İ			İ	i	
Date Spudded	Total Depth			P.B.T.D.						
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth			
Perforsions								Depth Casing Shoe		
HOLE SIZE	·····	TUBING, CASING AND CASING & TUBING SIZE			CEMENTING RECORD			SACKS CEMENT		
				· · · · · · · · · · · · · · · · · · ·						
V. TEST DATA AND REQUES OIL WELL (Test must be after re				be equal to of	exceed top allow	wable for this	depth or be f	or full 24 how	s.)	
Date First New Oil Run To Tank	Date of Test				ethod (Flow, pun					
Length of Test	Tubing Pressure			Casing Pressure			Choke Size			
Actual Prod. During Test	Oil - Bbls.			Water - Bbis.			Gas- MCF			
GAS WELL	<u> </u>			<u> </u>	<u></u>		<u>+</u>			
Actual Prod. Test - MCF/D	Length of Test			Bbls. Condensule/MMCF			Gravity of Condensate			
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)			Choke Size			
			NCF	۱ <u>٫                                    </u>						
VI. OPERATOR CERTIFICATE OF COMPLIANCE I hereby certify that the rules and regulations of the Oil Conservation				OIL CONSERVATION DIVISION						
Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.										
S. C.C. C.					Date Approved					
Signature					By Branch and All Stranger					
K. A. Freeman President Printed Name Title					Title					
10/29/91 915/697-7938										
Date	1 	elephone	No.							
						-				

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.

noter or other such changes