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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 Form C-104 Revised 1-1-89 See Instructions SOCEAN CHISE

## OIL CONSERVATION DIVISION

P.O. Box 2088

DEC 3 1 1992

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

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

Santa Fe, New Mexico 87504-2088 REQUEST FOR ALLOWABLE AND AUTHORIZATION

O. C. D.

	TOTR	ANSPO	ORT OIL	AND NAT	URAL GA	S				
perator					Well			API No.		
Mack Energy Corpora	30-025-11545									
idress		1 105	0							
P.O. Box 1359, Arte	sia, NM 8821	1-1359	y 	Othe	r (Please expla	inl				
eason(s) for Filing (Check proper box)				Oule					ļ	
lew Well	7177	Change in Transporter of: Effective Oil								
lecompletion $\square$	Oil LX Casinghead Gas				December 1, 1992					
hange in Operator	Casingnead Gas	Conoen	mate							
change of operator give name and address of previous operator										
	LANDIFACE									
I. DESCRIPTION OF WELL  Lease Name	Well No	Well No. [Pool Name, including					Kind of Lease		Lease No.	
Eaton SW	4	Lan	glie Ma	attix 7	Rivers Q	N States	Western of Lec			
ocation								** .		
Unit Letter N	. 990	_ Feet Fr	on The	South Line	and $\frac{2310}{}$	F	cet From The _	West	Line	
Oill Detter						Lea			County	
Section 12 Towns	ship 25S	Range	37E	, <u>N</u> I	APM,	ьеа			County	
		NTT 487	TS BLATET!	DAI CAS						
II. DESIGNATION OF TRA	NSPORTER OF Cond	OLL AN	DNATU	Address (Giv	address to wh	hich approved	copy of this fo	orm is to be se	nt)	
lame of Authorized Transporter of Oil	{A	ensare		P.O. B	ox 159,	Artesia	, NM 88	211-0159	9	
Navajo Refining Co.	singhead Gas XX	or Dry	Gas [	Address (Giv	e address to wh	hich approved	copy of this fo	orm is to be se	nı)	
Name of Authorized Transporter of Carl Sid Richardson Gard	201 Main St., Ft. Wor			th, TX 76102						
well produces oil or liquids,	Unit Sec.					When	When ?			
ive location of tanks.	N 12	258	37E	Yes						
this production is commingled with the	at from any other lease (	or pool, giv	ve comming	ling order num	ber:					
V. COMPLETION DATA	-					·		la B.t.	Diff Res'v	
	Oil We	eli	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Dill Kesv	
Designate Type of Completic		Ļ_		Total Depth	l	ــــــــــــــــــــــــــــــــــــــ	P.B.T.D.	l		
Date Spudded Date Compl. Ready to Pre				Total Depth						
				Top Oil/Gas Pay			Tubing Depth			
levations (DF, RKB, RT, GR, etc.) Name of Producing Formation				Top Old Cas 1 ay			, some set-			
							Depth Casir	ng Shoe		
Perforations										
	THEFT	CASI	NICL AND	CEMENTI	NG RECOR	RD				
		TUBING, CASING AND CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT		
HOLE SIZE	CASING &	TOBING	SILL							
				-						
V. TEST DATA AND REQU	IEST FOR ALLOV	VABLE		_1						
OIL WELL (Test must be aft	er recovery of total volue	ne of load	oil and mus	i be equal 10 o	r exceed top all	lowable for t	his depth or be	for full 24 hou	<u>4rs.)</u>	
Date First New Oil Run To Tank	Date of Test			Producing M	lethod (Flow, p	oump, gas lift	, elc.)			
Date I ha i to a care a								Choke Size		
Length of Test Tubing Press		essure		Casing Pressure			Choke Size			
20.00								Gas- MCF		
Actual Prod. During Test	Oil - Bbls.	Oil - Bbls.			Water - Bbls.					
-										
GAS WELL										
Actual Prod. Test - MCF/D	Length of Test	Length of Test			Bbls. Condensate/MMCF			Gravity of Condensate		
ACIDAL FOR THE INCLED								Choka Siza		
l'esting Method (pitot, back pr.)	Tubing Pressure (S	Tubing Pressure (Shut-in)			Casing Pressure (Shut-in)		Choke Size			
restrik terenton (buor) ones b. il										
A CORD A MOD CEDMIN	TCATE OF COA	ADI TA	NCF				/ATION!	DIVIO	⊃N!	
VI. OPERATOR CERTIF	ICATE OF CON	rit FILT	IICL		OIL COI	NSFH/	/ATION	ופואוח	או <i>ע</i> 	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above				JAN 12 10						
is true and complete to the best of	my knowledge and belief	<u>г</u> .		Dat	e Approve	ed		· · · · · · · · · · · · · · · · · · ·		
1	$\alpha$				C , ,pp, 0 v					
( nina D Carter				D.,	By Orig. Signed by Raul Kantz					
Signature Crissa D. Carter Procuction Clerk				By Paul Kautz						
<u>Crissa D. Carter</u>	Procu		Clerk				Garbagaa			
Printed Name	(505)	Title 1748-1	288	Title				1XI F.S.	191100	
12/30/92	· · · · · · · · · · · · · · · · · · ·	Telephone		FOF	RFC	ORD	ONLY	/ MA	Y 25199	
Date	,			11 July 10 10 10 10 10 10 10 10 10 10 10 10 10	- 2 Table -		<u> </u>			

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.